

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American College of Radiology Association PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="980643.48"/>	<input type="text" value="980643.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="857148.91"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="137609.16"/>	<input type="text" value="712827.64"/>
(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="994758.07"/>	<input type="text" value="1693471.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="93972.52"/>	<input type="text" value="792685.57"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="900785.55"/>	<input type="text" value="900785.55"/>
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 College of Radiology Association PAC

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).....	115005.03	611535.33
(ii) Unitemized	17604.13	91292.31
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	132609.16	702827.64
(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)	132609.16	702827.64
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.....	5000.00	10000.00
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))..... ▶	137609.16	712827.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	137609.16	712827.64

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	2972.52	9474.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2972.52	9474.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91000.00	397000.00
24. Independent Expenditures (use Schedule E)	0.00	386210.76
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	93972.52	792685.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	93972.52	792685.57

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	132609.16	702827.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	132609.16	702827.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2972.52	9474.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2972.52	9474.81

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Amendment to fix clerical data entry error.

Form/Schedule:
Transaction ID:

**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 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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 PAC

A. Harry Agress JR
 Full Name (Last, First, Middle Initial)
 Mailing Address Hackensack University Medical Ctr
 30 Prospect Ave
 City Hackensack State NJ Zip Code 07601-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2747978
 Amount of Each Receipt this Period
 30.00

B. Harry Agress JR
 Full Name (Last, First, Middle Initial)
 Mailing Address Hackensack University Medical Ctr
 30 Prospect Ave
 City Hackensack State NJ Zip Code 07601-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2014
Transaction ID : C2748003
 Amount of Each Receipt this Period
 23.07

C. Harry Agress JR
 Full Name (Last, First, Middle Initial)
 Mailing Address Hackensack University Medical Ctr
 30 Prospect Ave
 City Hackensack State NJ Zip Code 07601-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2014
Transaction ID : C2748020
 Amount of Each Receipt this Period
 23.07

SUBTOTAL of Receipts This Page (optional).....▶	76.14
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Ravi Alagappan

Mailing Address 3976 Canyon Road

City State Zip Code
 Lafayette CA 94549-2702

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

Name of Employer Occupation
 Self-Employed Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 12 / 2014
Transaction ID : C2730416

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Arthur S Albert

Mailing Address 124 W 60th St Apt 45

City State Zip Code
 New York NY 10023-7402

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

Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 316.14

Date of Receipt
 05 / 01 / 2014
Transaction ID : C2747979

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
c. Arthur S Albert

Mailing Address 124 W 60th St Apt 45

City State Zip Code
 New York NY 10023-7402

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

Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 316.14

Date of Receipt
 05 / 15 / 2014
Transaction ID : C2748004

Amount of Each Receipt this Period
 23.07

SUBTOTAL of Receipts This Page (optional)..... ▶ 303.07

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

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

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

FOR LINE NUMBER: PAGE 10 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Arthur S Albert

Mailing Address 124 W 60th St Apt 45

City State Zip Code
New York NY 10023-7402

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : C2748021

Amount of Each Receipt this Period
23.07

Full Name (Last, First, Middle Initial)
B. Bibb Allen JR

Mailing Address 3245 E Briarcliff Rd

City State Zip Code
Birmingham AL 35223-1304

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

Name of Employer Occupation
Montclair Baptist Medical Center Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2014

Transaction ID : C2730874

Amount of Each Receipt this Period
1250.00

Full Name (Last, First, Middle Initial)
C. Mark David Alson

Mailing Address 6641 N Forkner Ave

City State Zip Code
Fresno CA 93711-1326

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

Name of Employer Occupation
Sierra Imaging Associates Diagnostic Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : C2742326

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **1348.07**

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 140
	<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	

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 PAC

A. Rafael A Altieri
Full Name (Last, First, Middle Initial)

Mailing Address 15 Savoy St Apt D308

City Boston State MA Zip Code 02118-2588

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

Name of Employer South Shore Radiological Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 02 / 2014

Transaction ID : C2744524

Amount of Each Receipt this Period 100.00

B. Kyle Jacob Antes
Full Name (Last, First, Middle Initial)

Mailing Address 606 Madison

City Coppell State TX Zip Code 75019

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

Name of Employer Texas Oncology Occupation Medical Physicist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2014

Transaction ID : C2729553

Amount of Each Receipt this Period 250.00

C. Thomas A Applewhite
Full Name (Last, First, Middle Initial)

Mailing Address 13074 Starbuck Rd

City Saint Louis State MO Zip Code 63141-8544

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

Name of Employer West County Radiological Group Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 02 / 2014

Transaction ID : C2732831

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Raymond Alton Armstrong		Date of Receipt MM / DD / YYYY 05 / 09 / 2014 Transaction ID : C2729957
Mailing Address Radiology of Huntsville 2006 Franklin St SE Ste 200		Amount of Each Receipt this Period 100.00
City Huntsville	State AL	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer Baptist Medical Ctr-Montclair	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Lawrence Eugene Arrington		Date of Receipt MM / DD / YYYY 05 / 01 / 2014 Transaction ID : C2725849
Mailing Address 137 Lakemont Dr		Amount of Each Receipt this Period 500.00
City Augusta	State GA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. George Russell Autz		Date of Receipt MM / DD / YYYY 05 / 06 / 2014 Transaction ID : C2726847
Mailing Address 7 Sycamore Drive		Amount of Each Receipt this Period 250.00
City Port Washington	State NY	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer CWI	Occupation Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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 PAC

A. William Woods Baber
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Cricklewood Pl
 City State Zip Code
 Saint Louis MO 63131-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Midwest Radiological Associates, P.C. Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2014
Transaction ID : C2742941
 Amount of Each Receipt this Period
 500.00

B. James J Baek
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 Stonehenge Rd
 City State Zip Code
 Charleston WV 25314-1675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kanawha Valley Radiology Diagnostic Radiologist
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : C2729545
 Amount of Each Receipt this Period
 500.00

C. Gory Ballester
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 435
 City State Zip Code
 San Juan PR 00926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 University of Puerto Rico Radiologist
 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
 05 / 08 / 2014
Transaction ID : C2729552
 Amount of Each Receipt this Period
 250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 140
	<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

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 PAC

A. Robert Marlowe Barr
Full Name (Last, First, Middle Initial)

Mailing Address 215 Wrenwood Ln

City Charlotte State NC Zip Code 28211-1848

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

Name of Employer Mecklenburg Radiology Associates, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **855.00**

Date of Receipt **05 / 01 / 2014**

Transaction ID : C2725838

Amount of Each Receipt this Period **750.00**

B. Robert Marlowe Barr
Full Name (Last, First, Middle Initial)

Mailing Address 215 Wrenwood Ln

City Charlotte State NC Zip Code 28211-1848

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

Name of Employer Mecklenburg Radiology Associates, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **855.00**

Date of Receipt **05 / 30 / 2014**

Transaction ID : C2748433

Amount of Each Receipt this Period **21.00**

C. Walter S Bartynski
Full Name (Last, First, Middle Initial)

Mailing Address 3920 Gift Blvd

City Johns Island State SC Zip Code 29455

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

Name of Employer Medical University of South Carolina Occupation Neuroradiology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 08 / 2014**

Transaction ID : C2729612

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....▶	1271.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 140
(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 PAC

A. Jose Bauza
 Full Name (Last, First, Middle Initial)
 Mailing Address 3880 Inverness Way
 City State Zip Code
 Martinez GA 30907-9433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Brown and Associates Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2725845
 Amount of Each Receipt this Period
 500.00

B. Howard Marshall Bear
 Full Name (Last, First, Middle Initial)
 Mailing Address 4931 Pearlman Way
 City State Zip Code
 San Diego CA 92130-2789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 San Diego Imaging Medical Group Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014
Transaction ID : C2727488
 Amount of Each Receipt this Period
 50.00

C. Lily Marie Belfi MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Homestead Ave
 City State Zip Code
 Garden City NY 11530-1002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cornell Radiologist
 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
 05 / 06 / 2014
Transaction ID : C2726851
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)
A. Robert M Bell

Mailing Address St Marks Hosp
1200 E 3900 S

City State Zip Code
Salt Lake City UT 84124-1390

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

Name of Employer Occupation
Utah Imaging Associates Diagnostic Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2014

Transaction ID : C2740234

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Judith M Bender

Mailing Address 1400 Copper Circle

City State Zip Code
Rochester MI 48306

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

Name of Employer Occupation
Associated Radiologists of Oakland Cou Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2014

Transaction ID : C2725823

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. William R Benedetto JR

Mailing Address 390 Ponderosa Ln

City State Zip Code
Kalispell MT 59901-6835

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

Name of Employer Occupation
Northwest Imaging Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2014

Transaction ID : C2753655

Amount of Each Receipt this Period
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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 PAC

A. Kenneth G Berkenstock
 Full Name (Last, First, Middle Initial)
 Mailing Address Lancaster Radiology Associates
 PO Box 3555
 City Lancaster State PA Zip Code 17604-3555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Radiology Associates Occupation Radiation Oncologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt **05 / 07 / 2014**
Transaction ID : C2744633
 Amount of Each Receipt this Period **84.00**

B. Mark O Bernardy
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Barrington Hall Dr
 City Eatonton State GA Zip Code 31024-5459
 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 **1000.00**

Date of Receipt **05 / 08 / 2014**
Transaction ID : C2729602
 Amount of Each Receipt this Period **1000.00**

C. Timothy Andrew Bernauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 Pintail Pl
 City Appleton State WI Zip Code 54913-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Appleton Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1050.00**

Date of Receipt **05 / 18 / 2014**
Transaction ID : C2738870
 Amount of Each Receipt this Period **210.00**

SUBTOTAL of Receipts This Page (optional).....	1294.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Gordon H Beute

Mailing Address 6411 Wardell Ct

City State Zip Code
W. Bloomfield MI 48324-2880

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

Name of Employer Occupation
gordonb@rad.hfh.edu Henry Ford Health Care System

Receipt For: 2014
 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
 05 / 05 / 2014
Transaction ID : C2726139

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Alfred James Beyer III

Mailing Address 5201 Trent Woods Dr

City State Zip Code
Trent Woods NC 28562-7441

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

Name of Employer Occupation
Coastal Radiology Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014
Transaction ID : C2744623

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
C. James S Bezreh

Mailing Address South Shore Hospital
55 Fogg Rd

City State Zip Code
South Weymouth MA 02190-2455

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

Name of Employer Occupation
South Shore Hospital Diagnostic Radiologist

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
 05 / 02 / 2014
Transaction ID : C2744525

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. George A Binder

Mailing Address 401 Lakeshore Dr

City State Zip Code
Fayetteville NC 28305-5210

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

Name of Employer Occupation
Valley Radiology Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014
Transaction ID : C2726846

Amount of Each Receipt this Period
500.00

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

Mailing Address 79 Grant Street

City State Zip Code
Lexington MA 02420

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

Name of Employer Occupation
Dartmouth Hitchcock Manchester Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : C2729526

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Adam Russell Bogomol

Mailing Address 200 W 72nd St
Apt 11K

City State Zip Code
New York NY 10023-3267

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2747977

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1030.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 140
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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 PAC

A. Adam Russell Bogomol
Full Name (Last, First, Middle Initial)

Mailing Address 200 W 72nd St
Apt 11K

City New York State NY Zip Code 10023-3267

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
05 / 15 / 2014
Transaction ID : C2748017

Amount of Each Receipt this Period
23.07

B. Adam Russell Bogomol
Full Name (Last, First, Middle Initial)

Mailing Address 200 W 72nd St
Apt 11K

City New York State NY Zip Code 10023-3267

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
05 / 29 / 2014
Transaction ID : C2748022

Amount of Each Receipt this Period
23.07

C. John Christopher Bools
Full Name (Last, First, Middle Initial)

Mailing Address Catawba Radiological Assoc
18 13th Ave NE

City Hickory State NC Zip Code 28601-3748

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

Name of Employer Catawba Radiological Associates, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 30 / 2014
Transaction ID : C2748813

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... **196.14**

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 21 OF 140
	<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

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 PAC

A. James P Borgstede
Full Name (Last, First, Middle Initial)

Mailing Address 3995 Kakatosi Ln

City Colorado Springs State CO Zip Code 80908-3239

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

Name of Employer CU Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : C2728060

Amount of Each Receipt this Period
 2500.00

B. Ronald Joseph Boucher
Full Name (Last, First, Middle Initial)

Mailing Address 1630 NE Halsey St

City Portland State OR Zip Code 92232

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

Name of Employer U Portland Occupation Radiolgoist

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
 05 / 12 / 2014

Transaction ID : C2730422

Amount of Each Receipt this Period
 250.00

C. Andrew W Bowman MD
Full Name (Last, First, Middle Initial)

Mailing Address 5031 Monroe Forest Dr

City Jacksonville State FL Zip Code 32257-2204

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

Name of Employer Mayo Clinic Florida Occupation Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : C2729463

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
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 22 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. William G Bradley JR

Mailing Address Univ of CA-San Diego Med Ctr
402 Dickinson St Ste 454

City San Diego State CA Zip Code 92103-8224

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

Name of Employer University of California San Diego Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 06 / 2014
Transaction ID : C2757100

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Mark Paul Bramwit

Mailing Address 55 Janelle Ct

City Bedminster State NJ Zip Code 07921-2898

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

Name of Employer University Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 08 / 2014
Transaction ID : C2729598

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Michael Hamilton Brannon

Mailing Address 114 Holland Trace Cir

City Simpsonville State SC Zip Code 29681-5869

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

Name of Employer Greenville Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
05 / 02 / 2014
Transaction ID : C2726109

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1292.00

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 23 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial) A. Michael A Braun		Date of Receipt MM / DD / YYYY 05 / 06 / 2014 Transaction ID : C2726879
Mailing Address 8022 N. Gray Log Lane		Amount of Each Receipt this Period 500.00
City Fox Point	State WI	Zip Code 53217-2953
FEC ID number of contributing federal political committee. C		
Name of Employer Wisconsin Radiology Specialists	Occupation Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. William S Brooks III		Date of Receipt MM / DD / YYYY 05 / 01 / 2014 Transaction ID : C2725840
Mailing Address PO Box 2172		Amount of Each Receipt this Period 500.00
City Augusta	State GA	Zip Code 30903-2172
FEC ID number of contributing federal political committee. C		
Name of Employer Brown Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Joseph Benjamin Broudy MD		Date of Receipt MM / DD / YYYY 05 / 18 / 2014 Transaction ID : C2738872
Mailing Address 271 S Van Pelt St Apt B		Amount of Each Receipt this Period 30.42
City Philadelphia	State PA	Zip Code 19103-4937
FEC ID number of contributing federal political committee. C		
Name of Employer Lourdes Imaging Associates	Occupation Diagnostic and Interventional Radiolog	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.31	

SUBTOTAL of Receipts This Page (optional).....▶	1030.42
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 24 OF 140
	<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

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 PAC

A. Joseph Benjamin Broudy MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 271 S Van Pelt St Apt B
 City Philadelphia State PA Zip Code 19103-4937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lourdes Imaging Associates Diagnostic and Interventional Radiolog
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 243.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2014
Transaction ID : C2742325
 Amount of Each Receipt this Period
 30.41

B. Samuel J Buff
 Full Name (Last, First, Middle Initial)
 Mailing Address Coastal Radiology Box 12065
 City New Bern State NC Zip Code 28561-2065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Coastal Radiology Associates Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014
Transaction ID : C2744624
 Amount of Each Receipt this Period
 80.00

C. Charles Thomas Burke
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 Bearkling PI
 City Chapel Hill State NC Zip Code 27517-9416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Univ of N Carolina Hospital Diagnostic Radiologist
 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
 05 / 07 / 2014
Transaction ID : C2731606
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	360.41
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 25 OF 140
	<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	

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 PAC

A. Priscilla F Butler
Full Name (Last, First, Middle Initial)
Mailing Address 17004 Teal Ct
City Rockville State MD Zip Code 20855-2060
FEC ID number of contributing federal political committee. **C**
Name of Employer ACR Occupation Medical Physicist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2014
Transaction ID : C2727404
Amount of Each Receipt this Period
250.00

B. Justin John Campbell MD
Full Name (Last, First, Middle Initial)
Mailing Address 55 Fogg Rd
City South Weymouth State MA Zip Code 02190-2432
FEC ID number of contributing federal political committee. **C**
Name of Employer Massachusetts General Hospital Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2014
Transaction ID : C2744526
Amount of Each Receipt this Period
100.00

c. Nicholas Cade Cantrell MD
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 9110
City Kalispell State MT Zip Code 59904-2110
FEC ID number of contributing federal political committee. **C**
Name of Employer Northwest Imaging, P.C. Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2014
Transaction ID : C2753663
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... **850.00**
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 26 OF 140
	<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

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 PAC

A. Dina F Caroline
Full Name (Last, First, Middle Initial)

Mailing Address Temple University Hosp
3401 N Broad St

City Philadelphia State PA Zip Code 19140-5189

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

Name of Employer Temple University Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 06 / 2014
Transaction ID : C2756833

Amount of Each Receipt this Period
250.00

B. Salvatore Richard Cavoli
Full Name (Last, First, Middle Initial)

Mailing Address 30 E Ridge Rd

City Loudonville State NY Zip Code 12211-1476

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

Name of Employer Albany Advanced Imaging, PLLC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 06 / 2014
Transaction ID : C2727374

Amount of Each Receipt this Period
500.00

c. Hugh B Cecil
Full Name (Last, First, Middle Initial)

Mailing Address Northwest Imaging
PO Box 9110

City Kalispell State MT Zip Code 59904-2110

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

Name of Employer Northwest Imaging, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 20 / 2014
Transaction ID : C2753656

Amount of Each Receipt this Period
500.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Mark Aaron Chambers MD

Mailing Address 1005 Des Peres Woods Ct

City State Zip Code
Des Peres MO 63131-2055

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

Name of Employer Occupation
West County Radiological Group Diagnostic Radiologist

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
 05 / 02 / 2014
Transaction ID : C2732832

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Shelley K Charnoff

Mailing Address 192 Hinckley Rd

City State Zip Code
Milton MA 02186-2853

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

Name of Employer Occupation
South Shore Hospital Diagnostic Radiologist

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
 05 / 02 / 2014
Transaction ID : C2744527

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. Jugesh Inder Cheema

Mailing Address 2466 Oak Bend Pl

City State Zip Code
Newburgh IN 47630-8168

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

Name of Employer Occupation
Medical Center of Delaware Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2014
Transaction ID : C2753940

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 28 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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 PAC

A. Raja Sekhar Cheruvu
Full Name (Last, First, Middle Initial)

Mailing Address 165 Via Foresta Ln

City Williamsville	State NY	Zip Code 14221-1984
-----------------------	-------------	------------------------

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

Name of Employer Windsong Radiology Group	Occupation Radiologist
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Transaction ID : C2727367

Amount of Each Receipt this Period

250.00

B. Keith Chew
Full Name (Last, First, Middle Initial)

Mailing Address 18 Hawks Nest

City Chatham	State IL	Zip Code 62629-2016
-----------------	-------------	------------------------

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

Name of Employer McKesson	Occupation Consultant
------------------------------	--------------------------

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
05		06		2014

Transaction ID : C2726936

Amount of Each Receipt this Period

250.00

C. Philippe Chu MD
Full Name (Last, First, Middle Initial)

Mailing Address 1299 Corporate Dr Apt 721

City Westbury	State NY	Zip Code 11590-6636
------------------	-------------	------------------------

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

Name of Employer Franklin Hospital	Occupation Diagnostic Radiologist
---------------------------------------	--------------------------------------

Receipt For: 2014
 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
05		17		2014

Transaction ID : C2738754

Amount of Each Receipt this Period

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 140
	<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

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 PAC

A. Paul J Chuba
Full Name (Last, First, Middle Initial)

Mailing Address 842 Three Mill Dr

City Gross Pointe Park State MI Zip Code 48230-1808

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

Name of Employer SJLF Occupation Radiation Oncology

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
 05 / 08 / 2014

Transaction ID : C2729557

Amount of Each Receipt this Period
 250.00

B. Jessie Chusid
Full Name (Last, First, Middle Initial)

Mailing Address 14 Craig Street

City Jericho State NY Zip Code 11753

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

Name of Employer NSLIS Occupation Radiologist

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
 05 / 06 / 2014

Transaction ID : C2726912

Amount of Each Receipt this Period
 250.00

C. Eve Dillman Clark MD
Full Name (Last, First, Middle Initial)

Mailing Address 319 Hutchinson Ave

City Iowa City State IA Zip Code 52246

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

Name of Employer Univ. of Iowa Physicians Occupation Radiologist

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
 05 / 08 / 2014

Transaction ID : C2729608

Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 140
	(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"/> 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 College of Radiology Association PAC

A. Layne R Clemenz
Full Name (Last, First, Middle Initial)

Mailing Address 725 River Rd

City Columbia State SC Zip Code 29212-8809

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

Name of Employer Lexington Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : C2743624

Amount of Each Receipt this Period
 2500.00

B. Harris Luther Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 5639 Ashley Squares

City Memphis State TN Zip Code 38120-2470

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

Name of Employer U of TN Occupation Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : C2729547

Amount of Each Receipt this Period
 250.00

C. Kelli A Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 8602 Stable Crest Blvd

City Houston State TX Zip Code 77024-7028

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

Name of Employer Baylor College of Medicine Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : C2756970

Amount of Each Receipt this Period
 250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. James P Coleman MD
Full Name (Last, First, Middle Initial)

Mailing Address 7357 Savannah Dr

City Marion State MS Zip Code 39342-9004

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**

Date of Receipt **05 / 27 / 2014**

Transaction ID : C2742328

Amount of Each Receipt this Period **100.00**

B. Angel R Colon
Full Name (Last, First, Middle Initial)

Mailing Address Urb Ensanche Ramirez
262 Calle Rialto

City Mayaguez State PR Zip Code 00682-5841

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

Name of Employer Self-employed Occupation Diagnostic Radiologist

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 13 / 2014**

Transaction ID : C2730875

Amount of Each Receipt this Period **250.00**

c. Jamie Steven Colonnello MD
Full Name (Last, First, Middle Initial)

Mailing Address 6343 Alexander Dr

City Saint Louis State MO Zip Code 63105-2222

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

Name of Employer Occupation Midwest Radiological Associates, P.C. Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 27 / 2014**

Transaction ID : C2742942

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **850.00**

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 32 OF 140
	<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	

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 PAC

A. W Shawn Conwell MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 293 Piney Bluff Rd
 City Rembert State SC Zip Code 29128-9630
 Name of Employer Pitts Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 28 / 2014
Transaction ID : C2742844
 Amount of Each Receipt this Period 416.66

B. Timothy Andrew Crummy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2509 Middleton Beach Rd
 City Madison State WI Zip Code 53562-2912
 Name of Employer Madison Radiologists Occupation Diagnostic Radiologist
 Receipt For: 2014 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.42

Date of Receipt 05 / 05 / 2014
Transaction ID : C2726150
 Amount of Each Receipt this Period 30.42

C. Timothy Andrew Crummy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2509 Middleton Beach Rd
 City Madison State WI Zip Code 53562-2912
 Name of Employer Madison Radiologists Occupation Diagnostic Radiologist
 Receipt For: 2014 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.42

Date of Receipt 05 / 08 / 2014
Transaction ID : C2729519
 Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional).....▶	847.08
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 33 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial)
A. Douglas James Curry

Mailing Address 9815 Log Cabin Ct

City State Zip Code
Saint Louis MO 63124-1133

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

Name of Employer Occupation
Midwest Radiological Associates, P.C. Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2014
Transaction ID : C2742944

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Jennifer Marie Cutts MD

Mailing Address PO Box 1212

City State Zip Code
York Harbor ME 03911-1212

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

Name of Employer Occupation
South Coast Radiology Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2014
Transaction ID : C2727365

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Elizabeth Gilbert D'Angelo

Mailing Address 108 Bur Ben Ln

City State Zip Code
New Bern NC 28560-7520

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

Name of Employer Occupation
Coastal Radiology Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2014
Transaction ID : C2744625

Amount of Each Receipt this Period
80.00

SUBTOTAL of Receipts This Page (optional).....▶	830.00
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 34 OF 140
	<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

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 PAC

A. Kyle Laird Dale MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 8704 Fescue Ct
 City Missoula State MT Zip Code 59808-9468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Missoula Radiology, PC Occupation Diagnostic Radiologist
 Receipt For: 2014
 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
 05 / 08 / 2014
Transaction ID : C2729562
 Amount of Each Receipt this Period
 250.00

B. Susan Ann Danahy
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Old Farm Circle
 City Pittsford State NY Zip Code 14534-3006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Burg & Ide Imaging Occupation Physician
 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
 05 / 06 / 2014
Transaction ID : C2727368
 Amount of Each Receipt this Period
 250.00

C. Bolivia T Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 12907 St Edmund Way
 City Mitchellville State MD Zip Code 20721-4137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Imaging on Call Occupation Radiologist
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : C2729513
 Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. James B Davis

Mailing Address 52 Chigoe Ln

City State Zip Code
 Appling GA 30802-3838

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

Name of Employer Occupation
 Brown and Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2725846

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
B. Lori Ann Deitte

Mailing Address 3818 SW 21st Drive

City State Zip Code
 Gainesville FL 32608-2312

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

Name of Employer Occupation
 Univ. of FL Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014
Transaction ID : C2727383

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
C. Mark Charles DeLano

Mailing Address 3134 Manhattan Ln SE

City State Zip Code
 Grand Rapids MI 49506-2015

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

Name of Employer Occupation
 Advanced Radiology Services Radiologist

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
 05 / 08 / 2014
Transaction ID : C2729610

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 OF 140
	(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"/> 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 College of Radiology Association PAC

A. William Delfyett
Full Name (Last, First, Middle Initial)

Mailing Address 1000 Summerset Drive

City Pittsburgh State PA Zip Code 15217

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

Name of Employer UPMC Occupation Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : C2726717

Amount of Each Receipt this Period
500.00

B. John S DeMeritt
Full Name (Last, First, Middle Initial)

Mailing Address 18 Baldwin Rd

City Saddle River State NJ Zip Code 07458-3203

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : C2747980

Amount of Each Receipt this Period
30.00

c. John S DeMeritt
Full Name (Last, First, Middle Initial)

Mailing Address 18 Baldwin Rd

City Saddle River State NJ Zip Code 07458-3203

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : C2748005

Amount of Each Receipt this Period
23.07

SUBTOTAL of Receipts This Page (optional)..... ▶ **553.07**

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

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

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

FOR LINE NUMBER: PAGE 37 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. John S DeMeritt
 Mailing Address 18 Baldwin Rd
 City State Zip Code
 Saddle River NJ 07458-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2014
Transaction ID : C2748025
 Amount of Each Receipt this Period
 23.07

Full Name (Last, First, Middle Initial)
B. David P Diemer
 Mailing Address 2618 Wickerton Ct
 City State Zip Code
 Saint Louis MO 63122-3351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Midwest Radiological Associates, P.C. Diagnostic Radiologist
 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
 05 / 27 / 2014
Transaction ID : C2742945
 Amount of Each Receipt this Period
 400.00

Full Name (Last, First, Middle Initial)
C. E Michael Donner III
 Mailing Address PO Box 9090
 City State Zip Code
 Munderille LA 70470-9090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Oschner Health System Diagnostic Radiologist
 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
 05 / 08 / 2014
Transaction ID : C2729604
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 673.07
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 38 OF 140
(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 PAC

A. Eric Menzner Dorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 7709 N Club Car
 City State Zip Code
 Fox Point WI 53217-2937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medical College of Wisconsin Radiologist
 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
 05 / 12 / 2014
Transaction ID : C2730418
 Amount of Each Receipt this Period
 250.00

B. Richard Duszak JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1189 The By Way
 City State Zip Code
 Atlanta GA 30306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Emory University Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014
Transaction ID : C2728058
 Amount of Each Receipt this Period
 1000.00

C. Matthew D Dyson MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 6th St NW
 City State Zip Code
 Hickory NC 28601-3502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Catawba Radiological Associates Diagnostic Radiologist
 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
 05 / 30 / 2014
Transaction ID : C2748814
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
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 39 OF 140
	<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	

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 PAC

A. Merle Thomas Edwards
Full Name (Last, First, Middle Initial)

Mailing Address 4110 Cottonwood Dr

City Eau Claire State WI Zip Code 54701-7417

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

Name of Employer Medical X-Ray Consultants Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **909.09**

Date of Receipt **05 / 23 / 2014**

Transaction ID : C2743697

Amount of Each Receipt this Period **909.09**

B. Ahmed Bassem Elaini MD
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 54

City Andover State MA Zip Code 01810-0001

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

Name of Employer Massachusetts General Hospital Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 02 / 2014**

Transaction ID : C2744528

Amount of Each Receipt this Period **100.00**

C. Warren Dibrill Elam
Full Name (Last, First, Middle Initial)

Mailing Address 603 High Hampton Drive

City Martinez State GA Zip Code 30907-9149

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 01 / 2014**

Transaction ID : C2725841

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....▶	1509.09
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 40 OF 140
	<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	

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 PAC

A. Paul H Ellenbogen
Full Name (Last, First, Middle Initial)

Mailing Address 4240 Prescott Ave Apt 7E

City Dallas State TX Zip Code 75219-2392

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

Name of Employer Southwest Imaging & Interven specialis Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1041.70

Date of Receipt 05 / 16 / 2014

Transaction ID : C2736422

Amount of Each Receipt this Period 208.34

B. Tim H Emory
Full Name (Last, First, Middle Initial)

Mailing Address 1958 Bayard Ave

City St. Pul State MN Zip Code 55116-1216

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

Name of Employer Univ. of MN Occupation Radiologist

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2014

Transaction ID : C2727838

Amount of Each Receipt this Period 500.00

c. Roger S Eng
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 595

City Orinda State CA Zip Code 94563-1516

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

Name of Employer Golden State Radiology Occupation Physician

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2014

Transaction ID : C2726084

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1208.34

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 41 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. Anders G Engdahl

Mailing Address Northwest Imaging
PO Box 9110

City Kalispell State MT Zip Code 59904-2110

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

Name of Employer Northwest Imaging, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 20 / 2014
Transaction ID : C2753657

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. John T Engels

Mailing Address 40 Midpark Ln

City Saint Louis State MO Zip Code 63124-1557

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

Name of Employer Midwest Radiological Associates, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 27 / 2014
Transaction ID : C2742946

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Timothy Enright MD

Mailing Address 2044 E Higgins HI

City DE Pere State WI Zip Code 54115-1683

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

Name of Employer Green Bay Radiology Occupation Diagnostic Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 14 / 2014
Transaction ID : C2731108

Amount of Each Receipt this Period
500.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. George E Erbacher		Date of Receipt
Mailing Address 3211 W 73rd St		<input type="text" value="05"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Tulsa	OK	74132-2206
FEC ID number of contributing federal political committee.		Transaction ID : C2729595
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
DIA	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Catherine J Everett		Date of Receipt
Mailing Address 812 Madame Moore Ln		<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
New Bern	NC	28562-6446
FEC ID number of contributing federal political committee.		Transaction ID : C2744626
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="80.00"/>
Name of Employer	Occupation	
Coastal Radiology Associates	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="320.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Stephen L Farris MD		Date of Receipt
Mailing Address 3996 2nd Street Dr NW		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hickory	NC	28601-8092
FEC ID number of contributing federal political committee.		Transaction ID : C2748815
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
Catawba Radiology Associates	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1230.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 43 OF 140
	<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	

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 PAC

A. Kimberly Nicole Feigin
 Full Name (Last, First, Middle Initial)
 Mailing Address **Memorial Sloan-Kettering**
 300 E 66th St Unit 15
 City **New York** State **NY** Zip Code **10065-6800**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Memorial Sloan-Kettering Cancer Center** Occupation **Physician**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2725815
 Amount of Each Receipt this Period **250.00**

B. Brett D Ferdinand MD
 Full Name (Last, First, Middle Initial)
 Mailing Address **7 Canmdat Dr**
 City **Livingston** State **NJ** Zip Code **07039-5126**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Mont Clar Radiology** Occupation **Physician**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 08 / 2014**
Transaction ID : C2729582
 Amount of Each Receipt this Period **250.00**

C. George Joseph Ferrone
 Full Name (Last, First, Middle Initial)
 Mailing Address **440 E 62nd St Apt 18F**
 City **New York** State **NY** Zip Code **10065-8345**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Hackensack Radiology Group** Occupation **Diagnostic Radiologist**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **316.14**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2747972
 Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 44 OF 140
(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 PAC

A. George Joseph Ferrone
 Full Name (Last, First, Middle Initial)
 Mailing Address 440 E 62nd St Apt 18F
 City State Zip Code
 New York NY 10065-8345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2014
Transaction ID : C2747996
 Amount of Each Receipt this Period
 23.07

B. George Joseph Ferrone
 Full Name (Last, First, Middle Initial)
 Mailing Address 440 E 62nd St Apt 18F
 City State Zip Code
 New York NY 10065-8345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 316.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2014
Transaction ID : C2748027
 Amount of Each Receipt this Period
 23.07

C. Daniel A Finelli
 Full Name (Last, First, Middle Initial)
 Mailing Address 38700 Gaelic Glen
 City State Zip Code
 Solon OH 44139-5933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Akron Radiology Physician
 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
 05 / 07 / 2014
Transaction ID : C2728313
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 296.14
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 45 OF 140
	<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	

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 PAC

A. Keith C Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Lenox Place
 City St. Louis State MO Zip Code 63108-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Washington University Medical School Occupation Radiologist
 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
05 / 05 / 2014
Transaction ID : C2726715
 Amount of Each Receipt this Period
250.00

B. Stephen Ernest Fleming JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 S Harbor Drive
 City Sag Harbor State NY Zip Code 11963-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memorial Sloan Kettering Cancer Center Occupation Radiologist
 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
05 / 07 / 2014
Transaction ID : C2728055
 Amount of Each Receipt this Period
250.00

C. Dale Fletcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 239 Whiting Lane
 City Chesterfield State MO Zip Code 63005-6919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midwest Radiological Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2014
Transaction ID : C2742947
 Amount of Each Receipt this Period
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial)
A. Christopher Warren Flye

Mailing Address P O Box 12065

City State Zip Code
New Bern NC 28561

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

Name of Employer Occupation
Coastal Radiology Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2014

Transaction ID : C2744627

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
B. Benjamin Lewis Franc MD

Mailing Address 925 Tuscan Lane

City State Zip Code
Sacramento CA 95864-6100

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

Name of Employer Occupation
Sutter Health Nuc. Med Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : C2726905

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 9470

City State Zip Code
Hickory NC 28603-9470

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

Name of Employer Occupation
Catawba Radiological Associates, Inc. Diagnostic Radiologist

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
05 / 30 / 2014

Transaction ID : C2748816

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	480.00
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 47 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 PAC

Full Name (Last, First, Middle Initial)
A. Jeffrey James Freeman MD

Mailing Address 14924 Montclair Dr

City Westfield State IN Zip Code 46074-8123

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

Name of Employer Summit Radiology Occupation Diagnostic Radiologist

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
 05 / 06 / 2014

Transaction ID : C2726872

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Richard G Friedman

Mailing Address PO Box 9110

City Kalispell State MT Zip Code 59904-2110

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

Name of Employer Northwest Imaging, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : C2753659

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
C. Kathryn Gladys Gardner

Mailing Address 7674 Brandon Rd

City New Albany State OH Zip Code 43054-9006

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

Name of Employer Radiology Inc. Occupation Radiologist

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
 05 / 08 / 2014

Transaction ID : C2729599

Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)
A. Richard A Geise

Mailing Address 18430 5th Ave N

City Plymouth State MN Zip Code 55447-3312

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

Name of Employer Univ of Minn Hosp & Clinic Occupation Physicist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : C2725860

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. James Joseph Geraghty

Mailing Address 6250 Inwood Drive

City Eau Claire State WI Zip Code 54701-9142

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

Name of Employer Medical X-Ray Consultants Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
909.09

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : C2743704

Amount of Each Receipt this Period
909.09

Full Name (Last, First, Middle Initial)
c. Robert Charles Gibbs

Mailing Address 611 Quail Creek Rd

City Parsons State KS Zip Code 67357-2257

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

Name of Employer Robert Charles Gibbs, M.D., L.L.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : C2756987

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2159.09

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 49 OF 140
	<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	

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 PAC

A. Maryellyn Gilfeather
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 E Churchill Dr
 City Salt Lake City State UT Zip Code 84103-2266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Utah Imaging Associates Occupation Diagnostic Radiologist
 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
 05 / 08 / 2014
Transaction ID : C2729537
 Amount of Each Receipt this Period
 250.00

B. Richard L Goldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 5534 Collingwood Circle
 City Calabasas State CA Zip Code 91302-3140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tower Imaging Occupation Radiologist
 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
 05 / 07 / 2014
Transaction ID : C2729411
 Amount of Each Receipt this Period
 250.00

C. Shaun Jeffrey Gonda MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 N Sand Piper St
 City Wichita State KS Zip Code 67230-7182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wichita Radiological Group Occupation Radiologist
 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
 05 / 12 / 2014
Transaction ID : C2730424
 Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 140
	<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	

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 PAC

A. Eric Goodman MD
Full Name (Last, First, Middle Initial)

Mailing Address 21 Spencer St Apt 108

City Lebanon State NH Zip Code 03766-6318

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

Name of Employer Information Requested Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2014

Transaction ID : C2736423

Amount of Each Receipt this Period 100.00

B. Robert L Gore
Full Name (Last, First, Middle Initial)

Mailing Address 79 Richmond St

City Dorchester Center State MA Zip Code 02124-5729

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

Name of Employer Information Requested Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 02 / 2014

Transaction ID : C2744529

Amount of Each Receipt this Period 100.00

c. B Frank Gray III
Full Name (Last, First, Middle Initial)

Mailing Address 178 E Bowman Dr

City Kalispell State MT Zip Code 59901-6817

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

Name of Employer Information Requested Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 20 / 2014

Transaction ID : C2753660

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Robert Joseph Graziano
Full Name (Last, First, Middle Initial)

Mailing Address 415 E. Whispering Lane

City Galloway	State NJ	Zip Code 08205-2917
------------------	-------------	------------------------

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

Name of Employer Atlantic Medical Imaging	Occupation Radiologist
--	---------------------------

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
05	/	08	/	2014

Transaction ID : C2729600

Amount of Each Receipt this Period
250.00

B. Edward Douglas Green MD
Full Name (Last, First, Middle Initial)

Mailing Address 106 Windsong Cv

City Ridgeland	State MS	Zip Code 39157-8736
-------------------	-------------	------------------------

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

Name of Employer University of Mississippi Medical Cent	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2014

Transaction ID : C2725658

Amount of Each Receipt this Period
210.00

C. Milton J Guiberteau
Full Name (Last, First, Middle Initial)

Mailing Address 98 San Jacinto Blvd Unit F SR1103

City Austin	State TX	Zip Code 78701-4483
----------------	-------------	------------------------

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

Name of Employer Great Houston Radiological Assoc.	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2014

Transaction ID : C2729563

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1460.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 140
	(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 College of Radiology Association PAC

Full Name (Last, First, Middle Initial)
A. Geoffrey S Hamill

Mailing Address 425 W Jackson Rd

City State Zip Code
Saint Louis MO 63119-3643

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

Name of Employer Occupation
Midwest Radiological Associate Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2014
Transaction ID : C2742949

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Gene Han MD

Mailing Address 24 Briarcliff Rd

City State Zip Code
Tenafly NJ 07670-2902

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2014
Transaction ID : C2747981

Amount of Each Receipt this Period
19.23

Full Name (Last, First, Middle Initial)
c. Gene Han MD

Mailing Address 24 Briarcliff Rd

City State Zip Code
Tenafly NJ 07670-2902

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.21

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014
Transaction ID : C2748006

Amount of Each Receipt this Period
23.07

SUBTOTAL of Receipts This Page (optional).....▶	542.30
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 53 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. Gene Han MD

Mailing Address 24 Briarcliff Rd

City State Zip Code
Tenafly NJ 07670-2902

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.21

Date of Receipt
05 / 29 / 2014

Transaction ID : C2748028

Amount of Each Receipt this Period
23.07

Full Name (Last, First, Middle Initial)
B. Christopher Rigas Hancock MD

Mailing Address 1133 N Palm Canyon Dr Ste B

City State Zip Code
Palm Springs CA 92262-4431

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

Name of Employer Occupation
Mount Sinai Medical Center Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 06 / 2014

Transaction ID : C2727353

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Suzanne M Hand

Mailing Address 15635 Hidden Oaks Court

City State Zip Code
Carmel IN 46033-8157

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

Name of Employer Occupation
Breast Imaging Direct Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 08 / 2014

Transaction ID : C2729521

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... **1523.07**

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

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

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

FOR LINE NUMBER: PAGE 54 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. James Douglass Hanemann

Mailing Address 3801 St Charles Ave apt 503

City State Zip Code
New Orleans LA 70115

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

Name of Employer Occupation
Jefferson Radiology Associates Radiologist

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
 05 / 08 / 2014
Transaction ID : C2729605

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Peter Sven Hanson

Mailing Address 3521 Glen Way

City State Zip Code
Eau Claire WI 54701-7185

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

Name of Employer Occupation
Medical X-Ray Consultants Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
909.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2014
Transaction ID : C2743699

Amount of Each Receipt this Period
909.09

Full Name (Last, First, Middle Initial)
C. Kathleen House Hardin

Mailing Address 2210 Heritage Hill Dr

City State Zip Code
Jackson MS 39211-5821

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

Name of Employer Occupation
University of Mississippi Diagnostic Radiologist

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
 05 / 01 / 2014
Transaction ID : C2725853

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1309.09

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 55 OF 140
	<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	

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 PAC

A. Robert Houston Hardin JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2210 Heritage Hill Dr
 City Jackson State MS Zip Code 39211-5821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiological Group, P.A. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2725854
 Amount of Each Receipt this Period **250.00**

B. Steven D Harlan
 Full Name (Last, First, Middle Initial)
 Mailing Address CRA
 18 13th Ave NE, Box 308
 City Hickory State NC Zip Code 28601-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Catawba Radiological Associates, Inc. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 30 / 2014**
Transaction ID : C2748817
 Amount of Each Receipt this Period **150.00**

C. Keith William Harper
 Full Name (Last, First, Middle Initial)
 Mailing Address 602 46th Ave Dr NE
 City Hickory State NC Zip Code 28601-7318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Catawba Radiological Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 30 / 2014**
Transaction ID : C2748818
 Amount of Each Receipt this Period **150.00**

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 56 OF 140
	<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

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 PAC

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

Mailing Address PO Box 9110

City Kalispell State MT Zip Code 59904-2110

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

Name of Employer Northwest Imaging, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 20 / 2014**

Transaction ID : C2753661

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial)
B. Rayda N Hernandez-Guasch

Mailing Address 89 AVE DE DIEGO STE 105 PMB 525

City San Juan State PR Zip Code 00927-6370

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

Name of Employer University of Puerto Rico Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 11 / 2014**

Transaction ID : C2730283

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)
C. William T Herrington

Mailing Address 1110 Laurel Pl

City Athens State GA Zip Code 30606-5789

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

Name of Employer Athens Radiology Assocs Occupation Diagnostic Radiologist

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt **05 / 12 / 2014**

Transaction ID : C2730408

Amount of Each Receipt this Period **1500.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **2100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 OF 140 (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

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 PAC

Full Name (Last, First, Middle Initial) A. John F Hibbeln	Date of Receipt M M / D D / Y Y Y Y 05 / 06 / 2014 Transaction ID : C2727366
Mailing Address 1505 Gilbert Ave	Amount of Each Receipt this Period 250.00
City Downers Grove State IL Zip Code 60515-4536	
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Rush University Medical Center Radiologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Kevin Oliver Hicks	Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2014 Transaction ID : C2756972
Mailing Address 4709 John Scott Dr	Amount of Each Receipt this Period 350.00
City Lynchburg State VA Zip Code 24503-1003	
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Radiology Consultants of Lynchburg Diagnostic Radiologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Sean N Higginson MD	Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014 Transaction ID : C2742950
Mailing Address 6 Otto Ct	Amount of Each Receipt this Period 1000.00
City Saint Charles State MO Zip Code 63303-1328	
FEC ID number of contributing federal political committee. C	
Name of Employer Occupation Midwest Radiology Associates Diagnostic Radiologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	1600.00

**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 58 OF 140
	<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	

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 PAC

A. Joshua A Hirsch
Full Name (Last, First, Middle Initial)

Mailing Address 1 Longfellow PI Apt 3407

City Boston State MA Zip Code 02114-2432

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

Name of Employer Lahey Clinic Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2014
Transaction ID : C2756967

Amount of Each Receipt this Period 500.00

B. Rodney Harold Hobbs MD
Full Name (Last, First, Middle Initial)

Mailing Address 2312 Overton Rd

City Augusta State GA Zip Code 30904-3446

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

Name of Employer Brown and Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2014
Transaction ID : C2725839

Amount of Each Receipt this Period 1000.00

C. Charles Hugh Holloway
Full Name (Last, First, Middle Initial)

Mailing Address Radiology Associates of Dothan
1900 Fairview Ave

City Dothan State AL Zip Code 36301-3008

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

Name of Employer Radiology Associates of Dothan Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2014
Transaction ID : C2725825

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 59 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. Adrian W Holtzman MD

Mailing Address 945 18th Avenue Ct NW

City Hickory	State NC	Zip Code 28601-1268
-----------------	-------------	------------------------

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

Name of Employer Catawba Radiological Associates	Occupation Diagnostic Radiologist
---	--------------------------------------

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
05	/	30	/	2014

Transaction ID : C2748819

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)
B. Peter E Humphrey MD

Mailing Address 249 White Pine Rd

City Kalspell	State MT	Zip Code 59901-6829
------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2014

Transaction ID : C2753665

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
C. Elizabeth Ann Ignacio

Mailing Address 71 Kamaiki Cir

City Kahului	State HI	Zip Code 96732-3153
-----------------	-------------	------------------------

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

Name of Employer George Washington Med Center	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : C2731632

Amount of Each Receipt this Period

100.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 140
	<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	

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 PAC

A. Robert Scott Israel
Full Name (Last, First, Middle Initial)

Mailing Address 3710 SW Hillside Dr

City Portland State OR Zip Code 97221-4106

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

Name of Employer Diagnostic Radiology, PC Occupation Diagnostic Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 15 / 2014
Transaction ID : C2731618

Amount of Each Receipt this Period
250.00

B. Michael Todd Jacobs
Full Name (Last, First, Middle Initial)

Mailing Address 3818 11th Street PI NE

City Hickory State NC Zip Code 28601-8420

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

Name of Employer Catawba Radiological Associates, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
05 / 30 / 2014
Transaction ID : C2748820

Amount of Each Receipt this Period
150.00

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

Mailing Address Lancaster Radiology Associates
PO Box 3555

City Lancaster State PA Zip Code 17604-3555

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

Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 07 / 2014
Transaction ID : C2744639

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Eric Von Johnson MD
Full Name (Last, First, Middle Initial)

Mailing Address 4451 3rd Street Ln NW

City Hickory State NC Zip Code 28601-9022

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

Name of Employer Occupation
Information Requested Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 30 / 2014
Transaction ID : C2748821

Amount of Each Receipt this Period
150.00

B. William Kent Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 2839 Lombardy Ct

City Augusta State GA Zip Code 30909-3901

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

Name of Employer Occupation
Brown and Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
05 / 01 / 2014
Transaction ID : C2725842

Amount of Each Receipt this Period
500.00

C. Dale E Johnston
Full Name (Last, First, Middle Initial)

Mailing Address Radiology Associates PA
500 S University Ave Ste 101

City Little Rock State AR Zip Code 72205-5314

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

Name of Employer Occupation
Radiology Associates, P.A. Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
05 / 27 / 2014
Transaction ID : C2743549

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 62 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Peter Anthony S Johnstone

Mailing Address 8926 Waterside Cir

City State Zip Code
Indianapolis IN 46278-1158

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

Name of Employer Occupation
Radiation Oncology Division Radiation Oncologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2014
Transaction ID : C2742035

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Harold Bradford Jones JR

Mailing Address 2806 Bellevue Ave

City State Zip Code
Augusta GA 30909-3804

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

Name of Employer Occupation
Brown and Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2725847

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mark Allen Jones

Mailing Address 35 Beech Cir

City State Zip Code
Dyersburg TN 38024-6561

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

Name of Employer Occupation
Independent Radiology Associates Diagnostic Radiologist

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
 05 / 30 / 2014
Transaction ID : C2748061

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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 63 OF 140
	<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

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 PAC

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

Mailing Address 16 Fox Meadows

City Saint Louis State MO Zip Code 63127-1401

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

Name of Employer Scott Radiological Group, Inc. Occupation Diagnostic Radiologist

Receipt For: 2014
 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
 05 / 18 / 2014

Transaction ID : C2738893

Amount of Each Receipt this Period
 250.00

B. Carl L Kalbhen
Full Name (Last, First, Middle Initial)

Mailing Address 5728 Butler Ln

City Long Grove State IL Zip Code 60047-8243

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

Name of Employer Northwest Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : C2755986

Amount of Each Receipt this Period
 500.00

C. Baljendra S Kapoor
Full Name (Last, First, Middle Initial)

Mailing Address 6731 Riveo Crest Drive

City Brecksville State OH Zip Code 44141

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

Name of Employer CCF Occupation Radiologist

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
 05 / 06 / 2014

Transaction ID : C2727376

Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 140
(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 PAC

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

Mailing Address 610 Geddes Ridge

City State Zip Code
 Ann Arbor MI 48104-4145

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

Name of Employer Occupation
 Huron Valley Radiology Radiologist

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
 05 / 08 / 2014

Transaction ID : C2729555

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Michael E Katz

Mailing Address 8769 Escondido Way E

City State Zip Code
 Boca Raton FL 33433-2512

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

Name of Employer Occupation
 ICSF Pediatric Radiologist

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
 05 / 06 / 2014

Transaction ID : C2727388

Amount of Each Receipt this Period
 250.00

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

Mailing Address 834 Lakeshore Parkway

City State Zip Code
 New Orleans LA 70124

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

Name of Employer Occupation
 Oschner Health System Radiologist

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
 05 / 12 / 2014

Transaction ID : C2730419

Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Russell A Kelley

Mailing Address PO Box 585

City State Zip Code
 Norwell MA 02061-0585

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

Name of Employer Occupation
 South Shore Radiology Associates Diagnostic Radiologist

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
 05 / 02 / 2014

Transaction ID : C2744530

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. William Jay Kim MD

Mailing Address 405 Golf Course Dr

City State Zip Code
 Leonia NJ 07605-1415

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

Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 343.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : C2747973

Amount of Each Receipt this Period
 33.00

Full Name (Last, First, Middle Initial)
C. William Jay Kim MD

Mailing Address 405 Golf Course Dr

City State Zip Code
 Leonia NJ 07605-1415

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

Name of Employer Occupation
 Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 343.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : C2748007

Amount of Each Receipt this Period
 23.07

SUBTOTAL of Receipts This Page (optional)..... ▶ **156.07**

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 66 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. William Jay Kim MD

Mailing Address 405 Golf Course Dr

City State Zip Code
Leonia NJ 07605-1415

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
343.14

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : C2748029

Amount of Each Receipt this Period
23.07

Full Name (Last, First, Middle Initial)
B. Amy Briana Kirby MD

Mailing Address 14708 Hollyhock Dr

City State Zip Code
Oklahoma City OK 73142-1804

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

Name of Employer Occupation
Eagle Eye Imaging Diagnostic Radiologist

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
05 / 02 / 2014

Transaction ID : C2726111

Amount of Each Receipt this Period
85.00

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

Mailing Address 177 S 1800 W

City State Zip Code
Farmington UT 84025-5023

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

Name of Employer Occupation
Utah Imaging Associates Radiologist

Receipt For: 2014
 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
05 / 01 / 2014

Transaction ID : C2725663

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	358.07
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Kandace R Klein DO
Full Name (Last, First, Middle Initial)

Mailing Address 2061 Sylvan Lake Drive

City Grovetown State GA Zip Code 30813-5292

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

Name of Employer MCG/GRU Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : C2727397

Amount of Each Receipt this Period
 500.00

B. Richard P Klucznik
Full Name (Last, First, Middle Initial)

Mailing Address 3838 N. Braeswood Blvd #402

City Houston State TX Zip Code 77025-1938

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

Name of Employer Houston Methodist Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : C2726853

Amount of Each Receipt this Period
 1000.00

C. Jeffrey Paul Kramer
Full Name (Last, First, Middle Initial)

Mailing Address 2147 Meadow Ridge Dr

City Lancaster State PA Zip Code 17601-5762

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

Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : C2744641

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
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 68 OF 140
	<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

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 PAC

A. Christine R Kurland
Full Name (Last, First, Middle Initial)

Mailing Address 154 Council Rock Ave

City Rochester	State NY	Zip Code 14610-3335
-------------------	-------------	------------------------

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

Name of Employer Borg Imaging Group LLP	Occupation Diagnostic Radiologist
--	--------------------------------------

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
05	/	01	/	2014

Transaction ID : C2725834

Amount of Each Receipt this Period
250.00

B. Richard Alan Kutilek
Full Name (Last, First, Middle Initial)

Mailing Address 1853 S 107th St

City Omaha	State NE	Zip Code 68124-1065
---------------	-------------	------------------------

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

Name of Employer Radiological Center Inc.	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2014

Transaction ID : C2725810

Amount of Each Receipt this Period
500.00

C. Drew L Lambert
Full Name (Last, First, Middle Initial)

Mailing Address 1380 Stone Creek Ln #302

City Charlottesville	State VA	Zip Code 22902-7164
-------------------------	-------------	------------------------

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

Name of Employer UVA Health System	Occupation Physician
---------------------------------------	-------------------------

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
05	/	06	/	2014

Transaction ID : C2726858

Amount of Each Receipt this Period
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 140
	<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

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 PAC

A. Ronald Keith Larson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2739

City Oregon City State OR Zip Code 97045-8520

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

Name of Employer North Williamette Radiologists Occupation Diagnostic Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : C2742846

Amount of Each Receipt this Period
200.00

B. Loretta P Lawrence
Full Name (Last, First, Middle Initial)

Mailing Address 62 Rockcrest Rd

City Manhasset State NY Zip Code 11030-3417

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

Name of Employer NSLIJ Health System Occupation Radiologist

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
05 / 06 / 2014

Transaction ID : C2726848

Amount of Each Receipt this Period
250.00

c. John M Legan
Full Name (Last, First, Middle Initial)

Mailing Address 1135 Hurricane Hill Rd

City Dyersburg State TN Zip Code 38024-6819

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

Name of Employer Independent Radiology Associates Occupation Diagnostic Radiologist

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
05 / 30 / 2014

Transaction ID : C2748058

Amount of Each Receipt this Period
300.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 140
	<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

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 PAC

A. Paul Albert Leslie
Full Name (Last, First, Middle Initial)

Mailing Address 260 Eshelman Rd

City Lancaster State PA Zip Code 17601-5645

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

Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **05 / 07 / 2014**

Transaction ID : C2744642

Amount of Each Receipt this Period **100.00**

B. Johnson Benjamin Lightfoote
Full Name (Last, First, Middle Initial)

Mailing Address 808 South Easthills Drive

City West Covina State CA Zip Code 91791

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

Name of Employer Pomona Valley Imaging Med Group Occupation Radiologist

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 08 / 2014**

Transaction ID : C2729491

Amount of Each Receipt this Period **250.00**

C. Bonnie Lynn Litvack-Penn
Full Name (Last, First, Middle Initial)

Mailing Address 5 Buttonhook Road

City Chappaqua State NY Zip Code 10514-1200

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

Name of Employer White Plains Radiology Associates, PC Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 06 / 2014**

Transaction ID : C2727364

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **600.00**

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 71 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. Thomas G Loflin

Mailing Address 7408 Ashland Ln

City Birmingham State AL Zip Code 35242-2568

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

Name of Employer Birmingham Radiological Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : C2743815

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Michael D Longe MD

Mailing Address 305 River Wind Dr

City North Augusta State SC Zip Code 29841-6092

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : C2725851

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. H Esterbrook Longmaid III

Mailing Address 52 Harwich Rd

City Chestnut Hill State MA Zip Code 02467-3023

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

Name of Employer Deaconess Hospital Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2014

Transaction ID : C2739104

Amount of Each Receipt this Period
41.67

SUBTOTAL of Receipts This Page (optional)..... ▶ 1541.67

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 72 OF 140
	<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

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 PAC

A. James Clifford Lorentzen
Full Name (Last, First, Middle Initial)

Mailing Address Coastal Radiology
PO Box 12065

City New Bern State NC Zip Code 28561

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

Name of Employer Coastal Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
05 / 05 / 2014
Transaction ID : C2744628

Amount of Each Receipt this Period
80.00

B. Kay Denise Spong Lozano
Full Name (Last, First, Middle Initial)

Mailing Address 5991 South High Court

City Centennial State CO Zip Code 80121

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

Name of Employer Radiology Imaging Association Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1045.00**

Date of Receipt
05 / 20 / 2014
Transaction ID : C2740616

Amount of Each Receipt this Period
209.00

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

Mailing Address 502 N Stadium Way

City Tacoma State WA Zip Code 98403

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

Name of Employer Vantage Radiology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
05 / 06 / 2014
Transaction ID : C2727387

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **1289.00**

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 73 OF 140
	<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

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 PAC

A. Jennifer Lyn Lynch
Full Name (Last, First, Middle Initial)

Mailing Address 154 Forest Ave

City Cohasset State MA Zip Code 02025-1340

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

Name of Employer South Shore Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 02 / 2014**

Transaction ID : C2744531

Amount of Each Receipt this Period **100.00**

B. Loralie Dawn Ma
Full Name (Last, First, Middle Initial)

Mailing Address 11605 Mirror Pond Ct

City Fulton State MD Zip Code 20759-2305

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

Name of Employer Advanced Radiology PA Occupation Radiologist

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 05 / 2014**

Transaction ID : C2726153

Amount of Each Receipt this Period **250.00**

C. John L Mahoney
Full Name (Last, First, Middle Initial)

Mailing Address South Shore Hospital
55 Fogg Rd

City South Weymouth State MA Zip Code 02190-2432

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

Name of Employer South Shore Hospital Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 02 / 2014**

Transaction ID : C2744532

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **450.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Hiten Maganlal Malde			Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 7 Kinkaid Ave			Transaction ID : C2747965
City Closter	State NJ	Zip Code 07624-2908	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14		

Full Name (Last, First, Middle Initial) B. Hiten Maganlal Malde			Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 7 Kinkaid Ave			Transaction ID : C2747991
City Closter	State NJ	Zip Code 07624-2908	Amount of Each Receipt this Period 23.07
FEC ID number of contributing federal political committee. C			
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14		

Full Name (Last, First, Middle Initial) C. Hiten Maganlal Malde			Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 7 Kinkaid Ave			Transaction ID : C2748030
City Closter	State NJ	Zip Code 07624-2908	Amount of Each Receipt this Period 23.07
FEC ID number of contributing federal political committee. C			
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14		

SUBTOTAL of Receipts This Page (optional).....▶	76.14
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 75 OF 140
	<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	

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 PAC

A. Elizabeth Pamela Maltin
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Monfort Place
 City Syosset State NY Zip Code 11791-2119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pro Health Care Associates Occupation Radiologist
 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
 05 / 06 / 2014
Transaction ID : C2726947
 Amount of Each Receipt this Period
 250.00

B. Wells I Mangrum MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3130 Anric Dr
 City Eau Claire State WI Zip Code 54701-3054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 909.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2014
Transaction ID : C2743705
 Amount of Each Receipt this Period
 909.09

C. Patricia Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 1759 Creek View Dr
 City Fogelsville State PA Zip Code 18051-1716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Med Imaging of Lehigh Valley Occupation Diagnostic Radiologist
 Receipt For: 2014 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
 05 / 14 / 2014
Transaction ID : C2731128
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1409.09
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 76 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial) A. Alan D Massengill		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : C2748822
Mailing Address Catawba Radiological Assoc PO Box 308		Amount of Each Receipt this Period 150.00
City Hickory	State NC	Zip Code 28603-0308
FEC ID number of contributing federal political committee. C		
Name of Employer Catawba Radiological Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Vickie L Massey		Date of Receipt MM / DD / YYYY 05 / 07 / 2014 Transaction ID : C2728742
Mailing Address 2927 Verona Rd		Amount of Each Receipt this Period 500.00
City Mission Hills	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. C		
Name of Employer KUMC Cancer Center	Occupation Radiology Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Barry M McCook		Date of Receipt MM / DD / YYYY 05 / 06 / 2014 Transaction ID : C2727379
Mailing Address 1672 Dover Hill Dr		Amount of Each Receipt this Period 250.00
City Jacksonville	State FL	Zip Code 32225-4936
FEC ID number of contributing federal political committee. C		
Name of Employer Univ. of Florida	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 77 OF 140
	<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	

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 PAC

A. Patrick John McDonnell
 Full Name (Last, First, Middle Initial)
 Mailing Address 379 Sheepherder Hill Rd
 City Kalispell State MT Zip Code 59901-7160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwest Imaging, P.C. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : C2753658
 Amount of Each Receipt this Period
 500.00

B. Geraldine B McGinty
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Avenue B Apt 3C
 City New York State NY Zip Code 10009-5029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Montefiore Imaging Center Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : C2740617
 Amount of Each Receipt this Period
 100.00

C. Charles W McGuire
 Full Name (Last, First, Middle Initial)
 Mailing Address 1937 N Saddle Creek Ct
 City Wichita State KS Zip Code 67206-4401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wichita Radiological Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2014
Transaction ID : C2743926
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
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 78 OF 140
	<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	

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 PAC

A. Robert Carolin McKinstry III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1031 Highlands Plaza Dr West Apt 5
 City Saint Louis State MO Zip Code 63110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Washington University Occupation Neuro Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014
Transaction ID : C2757050
 Amount of Each Receipt this Period
 500.00

B. Jonathan R Medverd
 Full Name (Last, First, Middle Initial)
 Mailing Address 2217 E Newton St
 City Seattle State WA Zip Code 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Veterans Admin Occupation Diagnostic Radiology
 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
 05 / 07 / 2014
Transaction ID : C2728950
 Amount of Each Receipt this Period
 250.00

C. Ellen B Mendelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 East Pearson St Apt 4302
 City Chicago State IL Zip Code 60611-2171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwestern Occupation Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2014
Transaction ID : C2730425
 Amount of Each Receipt this Period
 1000.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. Eric M Meredith MD

Mailing Address 3636 8th Street PI NW

City State Zip Code
Hickory NC 28601-8086

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

Name of Employer Occupation
Catawba Radiological Associates Diagnostic Radiologist

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
05 / 30 / 2014

Transaction ID : C2748823

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Patricia J Mergo

Mailing Address Mayo Clinic
4500 San Pablo Rd

City State Zip Code
Jacksonville FL 32224-1865

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

Name of Employer Occupation
Univ of Florida Box 100374 Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : C2726799

Amount of Each Receipt this Period
85.00

Full Name (Last, First, Middle Initial)
c. Joseph M Mettenburg MD, PhD

Mailing Address 145 Springhouse Lane

City State Zip Code
Pittsburgh PA 15238-2315

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

Name of Employer Occupation
UPMC Physician

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
05 / 06 / 2014

Transaction ID : C2726878

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	485.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. William Sloane Millar
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Hedgerow Drive
 City Englewood State NJ Zip Code 07631-5036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Columbia Presbyterian Occupation Radiologist
 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
 05 / 15 / 2014
Transaction ID : C2731629
 Amount of Each Receipt this Period
 200.00

B. Mitchell Alan Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Constitution Court #1009
 City Hoboken State NJ Zip Code 07030-6730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2747967
 Amount of Each Receipt this Period
 30.00

C. Mitchell Alan Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Constitution Court #1009
 City Hoboken State NJ Zip Code 07030-6730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 566.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2014
Transaction ID : C2747997
 Amount of Each Receipt this Period
 23.07

SUBTOTAL of Receipts This Page (optional)..... ▶ 253.07
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 81 OF 140
	<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	

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 PAC

A. Mitchell Alan Miller
Full Name (Last, First, Middle Initial)

Mailing Address 2 Constitution Court
#1009

City Hoboken State NJ Zip Code 07030-6730

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

Name of Employer Hackensack Radiology Group Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **566.14**

Date of Receipt **05 / 29 / 2014**

Transaction ID : C2748032

Amount of Each Receipt this Period **23.07**

B. Ronald J Miller
Full Name (Last, First, Middle Initial)

Mailing Address Utah Imaging Associates
380 N 200 W Ste 209

City Bountiful State UT Zip Code 84010-7075

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

Name of Employer Utah Imaging assoc. Occupation Diagnostic Radiologist

Receipt For: 2014 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 23 / 2014**

Transaction ID : C2742173

Amount of Each Receipt this Period **250.00**

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

Mailing Address 20 Lawrence St

City Boston State MA Zip Code 02116-6211

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

Name of Employer South Shore Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 02 / 2014**

Transaction ID : C2744533

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional).....▶	373.07
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 82 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 PAC

Full Name (Last, First, Middle Initial)
A. Arl Van Moore JR

Mailing Address 1817 Craigmore Dr

City State Zip Code
Charlotte NC 28226-6212

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

Name of Employer Occupation
Charlotte Radiology Diagnostic Radiologist

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
 05 / 06 / 2014
Transaction ID : C2755976

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Cynthia Moran

Mailing Address American College of Radiology
505 9th St NW Ste 910

City State Zip Code
Washington DC 20004-2173

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

Name of Employer Occupation
American College of Radiology Executive Vice-President

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
 05 / 06 / 2014
Transaction ID : C2727405

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ellen B Morris

Mailing Address 10 Eagle Dr

City State Zip Code
Canton MA 02021-1573

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

Name of Employer Occupation
South Shore Hospital Diagnostic Radiologist

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
 05 / 02 / 2014
Transaction ID : C2744534

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 83 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial) A. Demetrius Konstantine Morros		Date of Receipt
Mailing Address 7418 Ridgcrest Court Rd		<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Birmingham	AL	35242-0525
FEC ID number of contributing federal political committee.		Transaction ID : C2726106
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="83.34"/>
Name of Employer	Occupation	
Birmingham Radiological Group P.C.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="416.70"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amy A Mosher		Date of Receipt
Mailing Address 333 Townsend St		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Saint Louis	MO	63141-8332
FEC ID number of contributing federal political committee.		Transaction ID : C2742951
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Midwest Radiological Associates, P.C.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hester J Muller		Date of Receipt
Mailing Address PO Box 1765		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
Laporte	IN	46352-1765
FEC ID number of contributing federal political committee.		Transaction ID : C2756848
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
La Porte Radiology, Inc.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1083.34"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 84 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Mohit Madan Naik MD

Mailing Address 424 W End Ave Apt 18C

City State Zip Code
New York NY 10024-5785

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : C2747982

Amount of Each Receipt this Period
38.46

Full Name (Last, First, Middle Initial)
B. Mohit Madan Naik MD

Mailing Address 424 W End Ave Apt 18C

City State Zip Code
New York NY 10024-5785

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : C2748009

Amount of Each Receipt this Period
23.07

Full Name (Last, First, Middle Initial)
C. Mohit Madan Naik MD

Mailing Address 424 W End Ave Apt 18C

City State Zip Code
New York NY 10024-5785

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : C2748033

Amount of Each Receipt this Period
23.07

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.60

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 85 OF 140
	<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	

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 PAC

A. Mary S Newell
Full Name (Last, First, Middle Initial)

Mailing Address 4485 Briarcliff Rd NE

City Atlanta State GA Zip Code 30345-2148

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

Name of Employer Emory Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : C2726895

Amount of Each Receipt this Period
 500.00

B. Joshua P Nickerson MD
Full Name (Last, First, Middle Initial)

Mailing Address 296 Heather Ln

City Shelburne State VT Zip Code 05482-7181

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

Name of Employer U of VT Occupation Radiologist

Receipt For: 2014
 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
 05 / 12 / 2014

Transaction ID : C2730393

Amount of Each Receipt this Period
 250.00

C. Gregory Neal Nicola
Full Name (Last, First, Middle Initial)

Mailing Address 80 Riverside Blvd Apt 14P

City New York State NY Zip Code 10069

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 219.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : C2747983

Amount of Each Receipt this Period
 19.23

SUBTOTAL of Receipts This Page (optional).....▶	769.23
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 86 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 PAC

A. Gregory Neal Nicola
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Riverside Blvd Apt 14P
 City New York State NY Zip Code 10069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014
Transaction ID : C2748010
 Amount of Each Receipt this Period
 23.07

B. Gregory Neal Nicola
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Riverside Blvd Apt 14P
 City New York State NY Zip Code 10069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014
Transaction ID : C2748034
 Amount of Each Receipt this Period
 23.07

C. John H Niemeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1652 Mason Knoll Rd
 City Saint Louis State MO Zip Code 63131-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midwest Radiological Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2014
Transaction ID : C2742952
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1046.14
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Alexander M Norbash		Date of Receipt MM / DD / YYYY 05 / 12 / 2014 Transaction ID : C2730407
Mailing Address 820 Harrison Ave		Amount of Each Receipt this Period 500.00
City Boston	State MA	Zip Code 02118-2347
FEC ID number of contributing federal political committee. C	Name of Employer Mass General Hospital	Occupation Diagnostic Radiologist
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Kevin M O'Brien		Date of Receipt MM / DD / YYYY 05 / 24 / 2014 Transaction ID : C2742251
Mailing Address St Johns Macomb Hospital 11800 E 12 Mile Rd		Amount of Each Receipt this Period 42.00
City Warren	State MI	Zip Code 48093-3494
FEC ID number of contributing federal political committee. C	Name of Employer Diagnostic Radiology Consultants, PC	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. Lisa Oakley		Date of Receipt MM / DD / YYYY 05 / 27 / 2014 Transaction ID : C2742953
Mailing Address 25 Dwyer Pl		Amount of Each Receipt this Period 300.00
City Saint Louis	State MO	Zip Code 63124-1625
FEC ID number of contributing federal political committee. C	Name of Employer Midwest Radiological Associates	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	842.00
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 88 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 PAC

A. Olufolajimi O Obembe MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5209 Fox Chase Dr
 City Lawrence State KS Zip Code 66049-4730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology & Nuclear Medicine Occupation Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2014
Transaction ID : C2730420
 Amount of Each Receipt this Period 1000.00

B. Adam Dale Olsan
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Fairway Dr
 City Lake Charles State LA Zip Code 70605-5902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Access Radiology Occupation Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2014
Transaction ID : C2726903
 Amount of Each Receipt this Period 250.00

C. Andrew W Osiason
 Full Name (Last, First, Middle Initial)
 Mailing Address 506 Julie Ct
 City Wyckoff State NJ Zip Code 07481-1101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.14

Date of Receipt 05 / 01 / 2014
Transaction ID : C2747984
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional).....	1280.00
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 89 OF 140
	<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	

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 PAC

A. Andrew W Osiason
Full Name (Last, First, Middle Initial)

Mailing Address 506 Julie Ct

City Wyckoff State NJ Zip Code 07481-1101

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : C2748011

Amount of Each Receipt this Period
23.07

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

Mailing Address 506 Julie Ct

City Wyckoff State NJ Zip Code 07481-1101

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : C2748036

Amount of Each Receipt this Period
23.07

C. Christine R Osmon
Full Name (Last, First, Middle Initial)

Mailing Address 14689 Summer Blossom Ln

City Chesterfield State MO Zip Code 63017-5670

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

Name of Employer Midwest Radiological Associates, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2014

Transaction ID : C2743208

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **546.14**

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

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

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

FOR LINE NUMBER: PAGE 90 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Pamela M Otto

Mailing Address UTHSCSA MS 7800
 7703 Floyd Curl Dr

City San Antonio State TX Zip Code 78229-3901

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

Name of Employer Univ of TX Hlth Sci Ctr Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : C2756982

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
B. Clay Harold Padginton

Mailing Address 55 Calle Jacarda

City Brownsville State TX Zip Code 78520

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

Name of Employer Valley Radiologists Occupation Radiologist

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
 05 / 08 / 2014

Transaction ID : C2729551

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Laeton J Pang

Mailing Address PO Box 38003

City Honolulu State HI Zip Code 96817-1605

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

Name of Employer Pacific Radiation Oncology Occupation Radiation Oncologist

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
 05 / 08 / 2014

Transaction ID : C2729560

Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 91 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. David Panush			Date of Receipt
Mailing Address 538 E 84th St Apt 4E			<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : C2747974
New York	NY	10028-7357	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="30.00"/>
Name of Employer	Occupation		
Hackensack Radiology Group	Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="316.14"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. David Panush			Date of Receipt
Mailing Address 538 E 84th St Apt 4E			<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : C2747998
New York	NY	10028-7357	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="23.07"/>
Name of Employer	Occupation		
Hackensack Radiology Group	Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="316.14"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. David Panush			Date of Receipt
Mailing Address 538 E 84th St Apt 4E			<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : C2748037
New York	NY	10028-7357	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="23.07"/>
Name of Employer	Occupation		
Hackensack Radiology Group	Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="316.14"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="76.14"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)
A. Jinha Mark Park MD

Mailing Address 5825 Lincoln Avenue, Suite D330

City	State	Zip Code
Buena Park	CA	90620

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

Name of Employer	Occupation
City of Hope	Physician

Receipt For: 2014
 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
05	/	08	/	2014

Transaction ID : C2729470

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Naveen Parti

Mailing Address 10 Sable Glen Drive

City	State	Zip Code
Greenville	SC	72615

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

Name of Employer	Occupation
Greenville Radiology	Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2014

Transaction ID : C2730441

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Dhiren Y Patel MD

Mailing Address 1041 Bluestone Dr

City	State	Zip Code
Lititz	PA	17543-6900

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

Name of Employer	Occupation
Lancaster Radiology Associates, Ltd.	Diagnostic Radiologist

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
05	/	07	/	2014

Transaction ID : C2744647

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 93 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial) A. Divyesh Gaju Patel MD		Date of Receipt MM / DD / YYYY 05 / 20 / 2014 Transaction ID : C2740614
Mailing Address 1143 Treadway Rd		Amount of Each Receipt this Period 100.00
City Munster	State IN	Zip Code 46321-2856
FEC ID number of contributing federal political committee. C	Name of Employer Radiologic Associates of Northwest Ind	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Rita S Patel		Date of Receipt MM / DD / YYYY 05 / 01 / 2014 Transaction ID : C2747975
Mailing Address 3 Ware Rd		Amount of Each Receipt this Period 30.00
City Upper Saddle River	State NJ	Zip Code 07458-1919
FEC ID number of contributing federal political committee. C	Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14	

Full Name (Last, First, Middle Initial) C. Rita S Patel		Date of Receipt MM / DD / YYYY 05 / 15 / 2014 Transaction ID : C2748000
Mailing Address 3 Ware Rd		Amount of Each Receipt this Period 23.07
City Upper Saddle River	State NJ	Zip Code 07458-1919
FEC ID number of contributing federal political committee. C	Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14	

SUBTOTAL of Receipts This Page (optional).....▶	153.07
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 94 OF 140
	<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	

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 PAC

A. Rita S Patel
Full Name (Last, First, Middle Initial)

Mailing Address 3 Ware Rd

City State Zip Code
Upper Saddle River NJ 07458-1919

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
316.14

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : C2748039

Amount of Each Receipt this Period
23.07

B. Perry G Pernicano
Full Name (Last, First, Middle Initial)

Mailing Address 5146 Birkdale Drive

City State Zip Code
Ann Arbor MI 48103-9731

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

Name of Employer Occupation
Univ. of MI Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : C2726868

Amount of Each Receipt this Period
500.00

C. Jeana Lynn Petree MD
Full Name (Last, First, Middle Initial)

Mailing Address 1174 Onyx Ct

City State Zip Code
Mason City IA 50401-7600

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

Name of Employer Occupation
Information Requested Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2014

Transaction ID : C2743623

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1523.07
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 95 OF 140
	<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	

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 PAC

A. Sean Donovan Pierce
Full Name (Last, First, Middle Initial)

Mailing Address 509 48th Ave Apt 2A

City	State	Zip Code
Long Island City	NY	11101-5604

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

Name of Employer	Occupation
Hackensack Radiology Group	Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	01	/	2014

Transaction ID : C2747976

Amount of Each Receipt this Period

30.00

B. Sean Donovan Pierce
Full Name (Last, First, Middle Initial)

Mailing Address 509 48th Ave Apt 2A

City	State	Zip Code
Long Island City	NY	11101-5604

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

Name of Employer	Occupation
Hackensack Radiology Group	Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	15	/	2014

Transaction ID : C2748013

Amount of Each Receipt this Period

30.00

C. Sean Donovan Pierce
Full Name (Last, First, Middle Initial)

Mailing Address 509 48th Ave Apt 2A

City	State	Zip Code
Long Island City	NY	11101-5604

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

Name of Employer	Occupation
Hackensack Radiology Group	Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	29	/	2014

Transaction ID : C2748041

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 140
	<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	

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 PAC

A. Robert J Pizzutiello JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 7867 Parish Rd
 City Victor State NY Zip Code 14564-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Upstate Medical Physics Occupation Medical Physicist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 06 / 2014**
Transaction ID : C2727391
 Amount of Each Receipt this Period **250.00**

B. George A Pjura JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 3703 Stonebridge Dr
 City Cape Girardeau State MO Zip Code 63701-9504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cape Radiology Group Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2725814
 Amount of Each Receipt this Period **1000.00**

C. Matthew S Pollack
 Full Name (Last, First, Middle Initial)
 Mailing Address 3780 Tiffany Drive
 City Easton State PA Zip Code 18045-3041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Progressive Physician Associates Occupation Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 06 / 2014**
Transaction ID : C2726892
 Amount of Each Receipt this Period **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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 PAC

Full Name (Last, First, Middle Initial)
A. Benjamin J Pomerantz MD

Mailing Address 342 Plantation Dr

City Kalispell State MT Zip Code 59901-6781

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

Name of Employer Northwest Imaging Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : C2753664

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Stuart H Prather III

Mailing Address 2220 Edgewood Dr

City Augusta State GA Zip Code 30904-3465

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

Name of Employer Brown and Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : C2725843

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Ori Preis MD

Mailing Address 60 Charlotte Rd

City Newton State MA Zip Code 02459-1708

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

Name of Employer South Shore Hospital Occupation Diagnostic Radiologist

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
05 / 02 / 2014

Transaction ID : C2744535

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 98 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Linda K Proctor

Mailing Address 537 Graeser Rd

City State Zip Code
 Creve Coeur MO 63141-7752

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

Name of Employer Occupation
 Midwest Radiological Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : C2743210

Amount of Each Receipt this Period
 400.00

Full Name (Last, First, Middle Initial)
B. Derk D Purcell MD

Mailing Address 362 Eldridge Ave

City State Zip Code
 Mill Valley CA 94941-4556

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

Name of Employer Occupation
 University of California San Francisco Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 515.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 10 / 2014

Transaction ID : C2730253

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
c. Mohammed Fareed Uddin Quraishi MD

Mailing Address 534 13th Ave W

City State Zip Code
 Kirkland WA 98033-4831

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

Name of Employer Occupation
 Radia, Inc. Interventional Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 11 / 2014

Transaction ID : C2730285

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 465.00

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

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

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

FOR LINE NUMBER: PAGE 99 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Joel I Rakow

Mailing Address 505 Ivy Lane

City Wyckoff State NJ Zip Code 07481-1072

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : C2747985

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
B. Joel I Rakow

Mailing Address 505 Ivy Lane

City Wyckoff State NJ Zip Code 07481-1072

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2014

Transaction ID : C2748014

Amount of Each Receipt this Period
23.07

Full Name (Last, First, Middle Initial)
C. Joel I Rakow

Mailing Address 505 Ivy Lane

City Wyckoff State NJ Zip Code 07481-1072

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

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : C2748042

Amount of Each Receipt this Period
23.07

SUBTOTAL of Receipts This Page (optional)..... ▶ **76.14**

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 100 OF 140
	<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

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 PAC

A. Eric C Rautiola
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 308

City Hickory State NC Zip Code 28603-0308

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

Name of Employer Catawba Radiological Associates, Inc. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **05 / 30 / 2014**

Transaction ID : C2748824

Amount of Each Receipt this Period **150.00**

B. John Thomas Renz
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 370

City Montrose State AL Zip Code 36559-0370

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

Name of Employer Alabama Coastal Radiology Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 08 / 2014**

Transaction ID : C2729580

Amount of Each Receipt this Period **250.00**

C. John M Rogers
Full Name (Last, First, Middle Initial)

Mailing Address 802 West Gap Creek Road

City Greer State SC Zip Code 29651-5065

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

Name of Employer Greenville Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 11 / 2014**

Transaction ID : C2730286

Amount of Each Receipt this Period **42.00**

SUBTOTAL of Receipts This Page (optional)..... **442.00**

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

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

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

FOR LINE NUMBER: PAGE 101 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Steven Gregory Rogers

Mailing Address 926 River Oak Dr

City North Augusta State SC Zip Code 29841-3282

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
05 / 01 / 2014

Transaction ID : C2725848

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. David I Safferman

Mailing Address 3733 Ashley Way

City Owings Mills State MD Zip Code 21117-1429

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

Name of Employer Advanced Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
05 / 12 / 2014

Transaction ID : C2756802

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
c. Arthur D Sandy

Mailing Address 2136 Peacock Lane

City Birmingham State AL Zip Code 35223-1708

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

Name of Employer Advanced Imaging Assoc of AL Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
05 / 27 / 2014

Transaction ID : C2742324

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **850.00**

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

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

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

FOR LINE NUMBER: PAGE 102 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Floyd Edgar Scales

Mailing Address 12580 Durbin Dr

City State Zip Code
Saint Louis MO 63141-8814

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

Name of Employer Occupation
Midwest Radiologists Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2014
Transaction ID : C2743211

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Charles D Scheil

Mailing Address 281 44th Avenue Cir NW

City State Zip Code
Hickory NC 28601-9016

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

Name of Employer Occupation
Catawba Radiological Associates, Inc. Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2014
Transaction ID : C2748825

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Mark L Schiebler

Mailing Address Univ of Wisconsin Radiology
600 Highland Ave

City State Zip Code
Madison WI 53792-3252

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

Name of Employer Occupation
Florida Radiology Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2014
Transaction ID : C2725827

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1650.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 103 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)
A. Kurt A Schoppe

Mailing Address 2801 Brazos Blvd Apt 4201

City State Zip Code
Euless TX 76039-5489

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

Name of Employer Occupation
Radiology Assoc. of North Texas Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : C2727389

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Donald James Schumacher

Mailing Address 347 Rice Ln

City State Zip Code
Whitefish MT 59937-8558

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

Name of Employer Occupation
Northwest Imaging Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : C2753662

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Michael J Seider

Mailing Address Summa Health Sys
885 S Sawburg Ave Ste 108

City State Zip Code
Alliance OH 44601-5905

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

Name of Employer Occupation
Cancer Care Ltd. Radiation Oncologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2014

Transaction ID : C2756980

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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 104 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial)
A. Bayne Selby JR

Mailing Address 2650 Middle St

City State Zip Code
Sullivans Island SC 29482

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

Name of Employer Occupation
MUSC Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2014

Transaction ID : C2730410

Amount of Each Receipt this Period
900.00

Full Name (Last, First, Middle Initial)
B. Ali R Sepahdari MD

Mailing Address 11826 Dorothy St Apt 301

City State Zip Code
Los Angeles CA 90049-5384

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

Name of Employer Occupation
UCLA Diagnostic Radiologist

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : C2742845

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
c. Leigh S Shuman

Mailing Address 1182 Oakmont Dr

City State Zip Code
Lancaster PA 17601-5079

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

Name of Employer Occupation
Lancaster Radiology Associates Diagnostic Radiologist

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
05 / 07 / 2014

Transaction ID : C2744644

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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 105 OF 140
	<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

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 PAC

A. William P Shuman
Full Name (Last, First, Middle Initial)

Mailing Address 13325 164th Ave NE

City	State	Zip Code
Redmond	WA	98052-1717

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

Name of Employer	Occupation
Evergreen Hospital Medical Ctr	Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2014

Transaction ID : C2725826

Amount of Each Receipt this Period
1000.00

B. Kristina Siddall
Full Name (Last, First, Middle Initial)

Mailing Address 2313 W 16th St

City	State	Zip Code
Wilmington	DE	19806

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

Name of Employer	Occupation
Christina Care Health System	Radiologist

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
05	/	12	/	2014

Transaction ID : C2730434

Amount of Each Receipt this Period
250.00

C. Stephen Nelson Sides
Full Name (Last, First, Middle Initial)

Mailing Address 112 Allen Dr

City	State	Zip Code
New Bern	NC	28562-7751

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

Name of Employer	Occupation
Coastal Radiology Associates	Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2014

Transaction ID : C2744629

Amount of Each Receipt this Period
80.00

SUBTOTAL of Receipts This Page (optional).....▶	1330.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 106 OF 140
(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 PAC

A. Lonnie D Simmons
 Full Name (Last, First, Middle Initial)
 Mailing Address 5222 Brackenwood Ct
 City State Zip Code
 La Crosse WI 54601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Gundersen Lutheran Clinic Diagnostic Radiologist
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : C2740618
 Amount of Each Receipt this Period
 83.34

B. William L Simpson JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 224 West 18th St Apt 50
 City State Zip Code
 New York NY 10011-4534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mt. Sinai Medical Center Radiologist
 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
 05 / 05 / 2014
Transaction ID : C2726265
 Amount of Each Receipt this Period
 250.00

C. Timothy C Sloan
 Full Name (Last, First, Middle Initial)
 Mailing Address 722 Newman Rd
 City State Zip Code
 New Bern NC 28562-5238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Coastal Radiology Associates Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014
Transaction ID : C2744630
 Amount of Each Receipt this Period
 80.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 413.34
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 107 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial)
A. Kevin L Smith

Mailing Address **Regional Diagnostic Radiology**
1990 Connecticut Ave S Ste 100

City **Sartell** State **MN** Zip Code **56377-2554**

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

Name of Employer **Regional Diagnostic Radiology** Occupation **Diagnostic Radiologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1041.70**

Date of Receipt
05 / 20 / 2014

Transaction ID : C2740615

Amount of Each Receipt this Period
208.34

Full Name (Last, First, Middle Initial)
B. Wilbur L Smith

Mailing Address **Detroit Receiving Hospital**
4201 Saint Antoine St Rm 3L8

City **Detroit** State **MI** Zip Code **48201-2153**

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

Name of Employer **Wayne State University** Occupation **Diagnostic Radiologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
05 / 05 / 2014

Transaction ID : C2757099

Amount of Each Receipt this Period
250.00

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

Mailing Address **17609 Ailanthus Dr**

City **Chesterfield** State **MO** Zip Code **63005-4284**

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

Name of Employer **Midwest Radiological Associates, P.C.** Occupation **Diagnostic Radiologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
05 / 27 / 2014

Transaction ID : C2743212

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	958.34
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 108 OF 140
	<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	

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 PAC

A. Mark Robert Southard MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2004 High Point Dr
 City Altoona State WI Zip Code 54720-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical X-Ray Consultants, Ltd. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **909.09**

Date of Receipt **05 / 23 / 2014**
Transaction ID : C2743700
 Amount of Each Receipt this Period **909.09**

B. Adam Wayne Specht
 Full Name (Last, First, Middle Initial)
 Mailing Address 3309 Chappell Pl
 City Virginia Beach State VA Zip Code 23452-6290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MCR, Inc Occupation Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 06 / 2014**
Transaction ID : C2726949
 Amount of Each Receipt this Period **250.00**

C. Eric M Spickler
 Full Name (Last, First, Middle Initial)
 Mailing Address 151 Manorwood Dr
 City Bloomfield Hills State MI Zip Code 48304-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Henry Ford Hospital Occupation Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 06 / 2014**
Transaction ID : C2726893
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....	1659.09
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 109 OF 140
	<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

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 PAC

A. David J St Germain MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Forrest Ct
 City State Zip Code
 Metairie LA 70001-6155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Physician
 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
 05 / 08 / 2014
Transaction ID : C2729578
 Amount of Each Receipt this Period
 250.00

B. John Allen Stahl
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Baywater Lane
 City State Zip Code
 Greensboro NC 27408-3123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Student Student
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 233.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014
Transaction ID : C2726906
 Amount of Each Receipt this Period
 10.00

C. Benjamin Zion Stallings II
 Full Name (Last, First, Middle Initial)
 Mailing Address 2100 Sahalea Ter
 City State Zip Code
 Silver Spring MD 20905-3900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DIA Diagnostic Radiologist
 Receipt For: 2014
 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
 05 / 21 / 2014
Transaction ID : C2741572
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	510.00
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 110 OF 140
	<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	

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 PAC

A. Jan Stauss MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 222 Wisconsin St Apt 218
 City Eau Claire State WI Zip Code 54703-3923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 909.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2014
Transaction ID : C2743706
 Amount of Each Receipt this Period
 909.09

B. Mark T Stephan
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 Mondavi Dr
 City Lafayette State LA Zip Code 70503-6635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Physician
 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
 05 / 08 / 2014
Transaction ID : C2729549
 Amount of Each Receipt this Period
 250.00

C. Eric J Stern
 Full Name (Last, First, Middle Initial)
 Mailing Address 2016 Constance Dr W
 City Seattle State WA Zip Code 98199-3947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Information Requested
 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
 05 / 01 / 2014
Transaction ID : C2725837
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1409.09
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 111 OF 140
	<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

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 PAC

A. Karl Edwin Stien MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3818 Timber Creek Ct
 City Eau Claire State WI Zip Code 54701-5634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical X-Ray Consultants Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **909.09**

Date of Receipt **05 / 23 / 2014**
Transaction ID : C2743703
 Amount of Each Receipt this Period **909.09**

B. James Palmer Strain
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Avery St Apt 31A
 City Boston State MA Zip Code 02111-1017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New England Medical Center Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **05 / 02 / 2014**
Transaction ID : C2744536
 Amount of Each Receipt this Period **100.00**

C. Gideon Strich
 Full Name (Last, First, Middle Initial)
 Mailing Address 1281 La Colina Dr #A
 City Tustin State CA Zip Code 92780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Radiologist
 Receipt For: 2014 Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 08 / 2014**
Transaction ID : C2729495
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional).....	1259.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 112 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)
A. Rathan M Subramaniam MD, PhD, M

Mailing Address 16 Wilderfield Crt

City Lutherville State MD Zip Code 21093-4758

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

Name of Employer JHU Occupation Radiologist

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
 05 / 07 / 2014

Transaction ID : C2728767

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Richard F Sullivan

Mailing Address 117 Bates Way

City Hanover State MA Zip Code 02339-1597

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

Name of Employer Department of Radiology Occupation Diagnostic Radiologist

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
 05 / 02 / 2014

Transaction ID : C2744537

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. James N Suojanen

Mailing Address South Shore Hospital
55 Fogg Rd

City South Weymouth State MA Zip Code 02190-2455

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

Name of Employer South Shore Radiology Associates Occupation Diagnostic Radiologist

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
 05 / 02 / 2014

Transaction ID : C2744538

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 113 OF 140
	<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	

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 PAC

A. Douglas Steven Sutherland
 Full Name (Last, First, Middle Initial)
 Mailing Address Radiology of Huntsville PC
 2006 Franklin St SE Ste 200
 City Huntsville State AL Zip Code 35801-4537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology of Huntsville, P.C. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2725857
 Amount of Each Receipt this Period **500.00**

B. Rajeev Suvi
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Happy Trail
 City San Antonio State TX Zip Code 78231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UTHSCSA Occupation Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 08 / 2014**
Transaction ID : C2729566
 Amount of Each Receipt this Period **250.00**

C. Margaret M Szabunio
 Full Name (Last, First, Middle Initial)
 Mailing Address 317 Gold Club Dr
 City Nicholersville State KY Zip Code 40356-6016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UK Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 12 / 2014**
Transaction ID : C2730412
 Amount of Each Receipt this Period **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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 114 OF 140
(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 PAC

A. Robert J Tallaksen
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Park St
 City Morgantown State WV Zip Code 26501-7515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West Virginia University Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014
Transaction ID : C2757052
 Amount of Each Receipt this Period
 1000.00

B. Joseph H Tashjian
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 Summit Ave
 City St. Paul State MN Zip Code 55105-3355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Paul Radiology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014
Transaction ID : C2728057
 Amount of Each Receipt this Period
 250.00

C. Knox Randolph Tate
 Full Name (Last, First, Middle Initial)
 Mailing Address 809 8th Ave NW
 City Hickory State NC Zip Code 28601-3548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Catawba Radiological Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : C2748826
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
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 115 OF 140
	<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	

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 PAC

Full Name (Last, First, Middle Initial) A. Shawn DeWayne Teague		Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2014 Transaction ID : C2753941
Mailing Address 11844 Tarver Ct		Amount of Each Receipt this Period 100.00
City Fishers	State IN	Zip Code 46037-8277
FEC ID number of contributing federal political committee. C		
Name of Employer Indiana Univ School of Medicine	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Kurt E Tech		Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : C2743552
Mailing Address 84 Stephens Rd		Amount of Each Receipt this Period 312.50
City Grosse Pointe Farms	State MI	Zip Code 48236-3625
FEC ID number of contributing federal political committee. C		
Name of Employer William Beaumont Hospital	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.50	

Full Name (Last, First, Middle Initial) C. Jacques C Tham MD		Date of Receipt M M / D D / Y Y Y Y Y 05 / 23 / 2014 Transaction ID : C2743707
Mailing Address 2715 Frank St		Amount of Each Receipt this Period 909.09
City Eau Claire	State WI	Zip Code 54703-2593
FEC ID number of contributing federal political committee. C		
Name of Employer Medical X-Ray Consultants, Ltd.	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 909.09	

SUBTOTAL of Receipts This Page (optional).....▶	1321.59
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 116 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 PAC

A. Lovick Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 Cordova Pl Ste 802
 City Santa Fe State NM Zip Code 87505-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Radiologist
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : C2729496
 Amount of Each Receipt this Period
 250.00

B. Jeffrey L Thomasson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Brookside Ln
 City Saint Louis State MO Zip Code 63124-1814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West County Radiological Group Occupation Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : C2732836
 Amount of Each Receipt this Period
 75.00

C. Thomas R Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1296
 City Dyersburg State TN Zip Code 38025-1296
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Independent Radiology Associates Occupation Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : C2748060
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	625.00
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 117 OF 140
	<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

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 PAC

Full Name (Last, First, Middle Initial) A. Christopher O Thornton		Date of Receipt MM / DD / YYYY 05 / 27 / 2014 Transaction ID : C2743548
Mailing Address 308 Townsend St		Amount of Each Receipt this Period 500.00
City Saint Louis	State MO	Zip Code 63141-8334
FEC ID number of contributing federal political committee. C		
Name of Employer Midwest Radiological Associates, P.C.	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Patrick J Toth		Date of Receipt MM / DD / YYYY 05 / 01 / 2014 Transaction ID : C2747964
Mailing Address 201 E 80th St Apt 8F		Amount of Each Receipt this Period 30.00
City New York	State NY	Zip Code 10021-0515
FEC ID number of contributing federal political committee. C		
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14	

Full Name (Last, First, Middle Initial) C. Patrick J Toth		Date of Receipt MM / DD / YYYY 05 / 15 / 2014 Transaction ID : C2747989
Mailing Address 201 E 80th St Apt 8F		Amount of Each Receipt this Period 23.07
City New York	State NY	Zip Code 10021-0515
FEC ID number of contributing federal political committee. C		
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14	

SUBTOTAL of Receipts This Page (optional).....▶	553.07
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 118 OF 140
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Patrick J Toth		Date of Receipt MM / DD / YYYY 05 / 29 / 2014 Transaction ID : C2748046
Mailing Address 201 E 80th St Apt 8F		Amount of Each Receipt this Period 23.07
City New York	State NY	Zip Code 10021-0515
FEC ID number of contributing federal political committee. C		
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.14	

Full Name (Last, First, Middle Initial) B. Raymond King Tu		Date of Receipt MM / DD / YYYY 05 / 08 / 2014 Transaction ID : C2729561
Mailing Address 1539 27th St NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		
Name of Employer GWU	Occupation Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Michael John Ulissey		Date of Receipt MM / DD / YYYY 05 / 08 / 2014 Transaction ID : C2729512
Mailing Address 2726 Lawtherwood Ct		Amount of Each Receipt this Period 250.00
City Dallas	State TX	Zip Code 75214-3807
FEC ID number of contributing federal political committee. C		
Name of Employer Breast Diagnostic Center	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1273.07
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 119 OF 140
	<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

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 PAC

A. Forrest Blake Walker MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 918 Johns Rd
 City Augusta State GA Zip Code 30904-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brown and Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2725850
 Amount of Each Receipt this Period **500.00**

B. Henry Z Wang
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Coach Side Lane
 City Pittsford State NY Zip Code 14534-9413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Rochester Occupation Physician Radiologist
 Receipt For: 2014 Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 08 / 2014**
Transaction ID : C2729530
 Amount of Each Receipt this Period **250.00**

C. David Reed Watts
 Full Name (Last, First, Middle Initial)
 Mailing Address 5029 Franklin Rd
 City Nashville State TN Zip Code 37220-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 01 / 2014**
Transaction ID : C2725808
 Amount of Each Receipt this Period **1000.00**

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 120 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Therese M Weber
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 59569

City Birmingham State AL Zip Code 35259-9569

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

Name of Employer Wake Forest Univ Occupation Diagnostic Radiologist

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
 05 / 01 / 2014

Transaction ID : C2725806

Amount of Each Receipt this Period
 250.00

B. Larry J Wells
Full Name (Last, First, Middle Initial)

Mailing Address 3718 Sapphire Dr

City Martinez State GA Zip Code 30907-9572

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

Name of Employer Brown Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : C2725844

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1965 Glendower Dr

City Lancaster State PA Zip Code 17601-4945

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

Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : C2744648

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 121 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Douglas John Wester JR

Mailing Address 2405 Covemont Dr SE

City State Zip Code
Huntsville AL 35801-2260

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

Name of Employer Occupation
Radiology Associates of Huntsville Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : C2736420

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Patrick Noel Weybright

Mailing Address 1234 Mastersonville Rd

City State Zip Code
Manheim PA 17545-9461

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

Name of Employer Occupation
Lancaster Radiology Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2014
Transaction ID : C2744646

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Burt T Weyhing III

Mailing Address 158 Kenwood Rd

City State Zip Code
Grosse Pointe Farms MI 48236-3522

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

Name of Employer Occupation
L. Reynolds & Associates, P.C. Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2725836

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00

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 122 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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 PAC

Full Name (Last, First, Middle Initial) A. Charles D Williams		Date of Receipt MM / DD / YYYY 05 / 01 / 2014 Transaction ID : C2725809
Mailing Address 456 Carr Ln		Amount of Each Receipt this Period 250.00
City Tallahassee	State FL	Zip Code 32312-8043
FEC ID number of contributing federal political committee. C		
Name of Employer Radiology Associates of Tallahassee	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Rodrick A Williams		Date of Receipt MM / DD / YYYY 05 / 12 / 2014 Transaction ID : C2730417
Mailing Address 60 Hospital Road		Amount of Each Receipt this Period 250.00
City Leominster	State MA	Zip Code 01453-2205
FEC ID number of contributing federal political committee. C		
Name of Employer Centmass Imaging Inc.	Occupation Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mark D Wittry		Date of Receipt MM / DD / YYYY 05 / 08 / 2014 Transaction ID : C2729456
Mailing Address 10525 Concord School Rd		Amount of Each Receipt this Period 83.34
City Saint Louis	State MO	Zip Code 63128-1232
FEC ID number of contributing federal political committee. C		
Name of Employer West County Radiological Group, Inc.	Occupation Cardiac Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	

SUBTOTAL of Receipts This Page (optional).....▶	583.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 123 OF 140
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Ellen L Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 239 E 79 St Apt 5A

City New York State NY Zip Code 10075-0812

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

Name of Employer Montefiore Medical Center Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 06 / 2014
Transaction ID : C2727375

Amount of Each Receipt this Period
250.00

B. James Hardy Wolfe
Full Name (Last, First, Middle Initial)

Mailing Address Independent Radiology Assoc
PO Box 1296

City Dyersburg State TN Zip Code 38025-1296

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

Name of Employer Independent Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
05 / 30 / 2014
Transaction ID : C2748062

Amount of Each Receipt this Period
300.00

C. William G Wolff
Full Name (Last, First, Middle Initial)

Mailing Address 40 Old Pond Rd

City Great Neck State NY Zip Code 11023-1031

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

Name of Employer Radiology Associates of Main Street Occupation Chief

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 01 / 2014
Transaction ID : C2725856

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 124 OF 140
(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 PAC

Full Name (Last, First, Middle Initial)
A. Pamela Woodward

Mailing Address 7171 Princeton Ave

City State Zip Code
St. Louis MO 63130

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

Name of Employer Occupation
WU Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2014
Transaction ID : C2726881

Amount of Each Receipt this Period
500.00

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

Mailing Address 8729 Valentine Ct

City State Zip Code
Raleigh NC 27615-5830

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

Name of Employer Occupation
Wake Radiology Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2725859

Amount of Each Receipt this Period
520.00

Full Name (Last, First, Middle Initial)
c. Clement Yang MD

Mailing Address 555 W 59th St Apt 19E

City State Zip Code
New York NY 10019-1241

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

Name of Employer Occupation
Hackensack Radiology Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2014
Transaction ID : C2747969

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional)..... ▶ 1039.23

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 125 OF 140
	<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	

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 PAC

A. Clement Yang MD
Full Name (Last, First, Middle Initial)

Mailing Address 555 W 59th St Apt 19E

City New York	State NY	Zip Code 10019-1241
------------------	-------------	------------------------

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

Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **219.21**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2014

Transaction ID : C2747993

Amount of Each Receipt this Period

23.07

B. Clement Yang MD
Full Name (Last, First, Middle Initial)

Mailing Address 555 W 59th St Apt 19E

City New York	State NY	Zip Code 10019-1241
------------------	-------------	------------------------

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

Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **219.21**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2014

Transaction ID : C2748048

Amount of Each Receipt this Period

23.07

C. Mark Ming-Yi Yeh
Full Name (Last, First, Middle Initial)

Mailing Address 330 Cordova St Unit 311

City Pasadena	State CA	Zip Code 91101-4604
------------------	-------------	------------------------

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

Name of Employer Mark M. Yeh, M.D., Inc.	Occupation Diagnostic Radiologist
---	--------------------------------------

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
05	/	25	/	2014

Transaction ID : C2742274

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	96.14
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 126 OF 140
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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 PAC

A. Full Name (Last, First, Middle Initial)
Syed Zaidi

Mailing Address 10 Brandon Court

City Moreland Hills State OH Zip Code 44022

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

Name of Employer Rad. Assoc. of Canton Occupation Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : C2726891

Amount of Each Receipt this Period
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	115005.03

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

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

FOR LINE NUMBER: PAGE 127 OF 140
(check only one)

<input 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 checked="" 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 College of Radiology Association PAC

A. MATHESON FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 521048

City SALT LAKE CITY	State UT	Zip Code 84152
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00344721

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2014

Transaction ID : C2743812

Amount of Each Receipt this Period
5000.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

City	State	Zip Code
------	-------	----------

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 PAC

Full Name (Last, First, Middle Initial)

A. Bank of America - Hard

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261-7025

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2014

Transaction ID : D159125

Amount of Each Disbursement this Period

2972.52

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2972.52

2972.52

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

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

FOR LINE NUMBER:
(check only one)

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

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 PAC

Full Name (Last, First, Middle Initial)

A. Donna Sheldon for Congress

Mailing Address PO Box 1189

City Monroe State GA Zip Code 30655-1189

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Donna Sheldon

Office Sought: House
 Senate
 President
State: GA District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : D158406

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Dr Brian Babin for Congress

Mailing Address PO Box 159

City Woodville State TX Zip Code 75979-0159

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Runoff

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Transaction ID : D158329

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Friends of Bob Johnson

Mailing Address PO Box 16401

City Savannah State GA Zip Code 31416-3101

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Bob Johnson

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Transaction ID : D158328

Amount of Each Disbursement this Period

2500.00

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

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

10500.00

**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"/> 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 PAC

Full Name (Last, First, Middle Initial) A. HAWKEYE PAC, THE		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address PO Box 7255		Transaction ID : D158632
City Des Moines	State IA	
Zip Code 50309	Purpose of Disbursement Contribution to a Leadership PAC	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HOLDING ONTO OREGON'S PRIORITIES		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address PO Box 3314		Transaction ID : D158630
City Portland	State OR	
Zip Code 97208	Purpose of Disbursement Contribution to a Leadership PAC	Amount of Each Disbursement this Period 2500.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Jenkins for Congress		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address PO Box 727		Transaction ID : D158324
City Huntington	State WV	
Zip Code 25711	Purpose of Disbursement Contribution to a Federal Campaign	Amount of Each Disbursement this Period 5000.00
Candidate Name Evan Jenkins	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 03		

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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158625

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Mooney for Congress

Mailing Address PO Box 1863

City Martinsburg State WV Zip Code 25402

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Alex Mooney

Office Sought: House Senate President
State: WV District: 02

Disbursement For: 2014 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Transaction ID : D158323

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Norma Torres for Congress

Mailing Address 4225 Myrtle Avenue

City Long Beach State CA Zip Code 90807

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Norma Torres

Office Sought: House Senate President
State: District: 35

Disbursement For: 2014 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158655

Amount of Each Disbursement this Period

2500.00

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

12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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 PAC

Full Name (Last, First, Middle Initial)

A. ORRINPAC

Mailing Address 175 S. WEST TEMPLE, SUITE 650

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : D158636

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PITTSPAC

Mailing Address 1942 Park Plaza

City Lancaster State PA Zip Code 17601

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : D158633

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DAVE CAMP FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement
Voided Check

Candidate Name

Rep. Dave Camp

Office Sought: House Senate President
State: MI District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : D157967

Amount of Each Disbursement this Period

-3500.00

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

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

-1500.00

**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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVE JOYCE

Mailing Address 320 KENARDEN DRIVE

City CLEVELAND State OH Zip Code 44143

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. David Joyce

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : D157990

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DAVE JOYCE

Mailing Address 320 KENARDEN DRIVE

City CLEVELAND State OH Zip Code 44143

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. David Joyce

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : D157991

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. ENGEL FOR CONGRESS

Mailing Address 462 CALIFORNIA ROAD

City BRONXVILLE State NY Zip Code 10708

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Eliot L. Engel

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 16

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : D158634

Amount of Each Disbursement this Period

1000.00

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

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

11000.00

**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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. LOBIONDO FOR CONGRESS

Mailing Address P. O. BOX 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Frank A. LoBiondo

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NJ District: 02

Date of Disbursement

/ /

Transaction ID : D158646

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. LOBIONDO FOR CONGRESS

Mailing Address P. O. BOX 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Frank A. LoBiondo

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NJ District: 02

Date of Disbursement

/ /

Transaction ID : D158647

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement
Cont. to a Federal Campaign

Candidate Name
Rep. James B. Renacci

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: OH District: 16

Date of Disbursement

/ /

Transaction ID : D157988

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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 PAC

Full Name (Last, First, Middle Initial)

A. JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. James B. Renacci

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: OH District: 16

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : **D157989**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOE PITTS

Mailing Address PO BOX 775

City UNIONVILLE State PA Zip Code 19375

Purpose of Disbursement
Voided Check

Candidate Name
Rep. Joe Pitts

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: PA District: 16

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2014

Transaction ID : **D158068**

Amount of Each Disbursement this Period

-1000.00

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
Contribution to a Federal Campaign

Candidate Name
Rep. Joe Wilson

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: SC District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : **D158640**

Amount of Each Disbursement this Period

2000.00

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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. FLEMING FOR CONGRESS

Mailing Address PO BOX 1236

City MINDEN State LA Zip Code 71058

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. John Fleming

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: LA District: 04

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158635

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MO BROOKS FOR CONGRESS

Mailing Address 7610 FOXFIRE DR.

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Mo Brooks

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: AL District: 05

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158645

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Richard Hudson

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NC District: 08

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158631

Amount of Each Disbursement this Period

2000.00

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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. ROB WITTMAN FOR CONGRESS

Mailing Address PO BOX 999

City State Zip Code
MONTROSS VA 22520

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Rob Wittman

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: VA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	4

Transaction ID : D158648

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. TED POE FOR CONGRESS

Mailing Address P.O. BOX 14222

City State Zip Code
HUMBLE TX 77347

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Ted Poe

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TX District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	4

Transaction ID : D158620

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. MURPHY FOR CONGRESS

Mailing Address PO BOX 24551

City State Zip Code
PTTSBURGH PA 15234

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Tim Murphy

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: PA District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	4

Transaction ID : D158626

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0

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

6	0	0	0	0	0	0	0	0	0

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

6	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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 PAC

Full Name (Last, First, Middle Initial)

A. HOOSIERS FOR ROKITA, INC.

Mailing Address 314 ARSENAL AVE.

City INDIANAPOLIS State IN Zip Code 46201

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Rep. Todd Rokita

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IN District: 04

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158621

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. ALEXANDER FOR SENATE 2014 INC

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Sen. Lamar Alexander

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TN District: 00

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158638

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. COLLINS FOR SENATOR

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402-1096

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Sen. Susan Collins

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: ME District: 00

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158637

Amount of Each Disbursement this Period

4000.00

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

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

10500.00

**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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR COCHRAN

Mailing Address PO BOX 7183

City TUPELO State MS Zip Code 38802

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Sen. Thad Cochran

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MS District: 00

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158649

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Ted Lieu for Congress

Mailing Address PO Box 1309

City Torrance State CA Zip Code 90505-0309

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Ted Lieu

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : D158407

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. TENN POLITICAL ACTION COMMITTEE INC (TENN PAC)

Mailing Address 228 SOUTH WASHINGTON
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : D158639

Amount of Each Disbursement this Period

5000.00

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

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

13000.00

**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"/> 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 PAC

Full Name (Last, First, Middle Initial)

A. Thom Tillis Committee

Mailing Address PO Box 97396

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Thom Tillis

Office Sought: House
 Senate
 President
State: NC District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : D157992

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Walters for Congress

Mailing Address 30151 Tomas

City Rancho Santa Margarita State CA Zip Code 92688-2125

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name
Mimi Walters

Office Sought: House
 Senate
 President
State: CA District: 45

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : D158653

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

6500.00

91000.00