

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1445 New York Avenue NW
Ste 800
 Check if different than previously reported. (ACC) Washington DC 20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00359539 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 05 / 01 / 2018 through 05 / 31 / 2018

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

Signature of Treasurer Debnar, Steven, , , [Electronically Filed] Date 06 / 13 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="37455.95"/>	<input type="text" value="37455.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="68836.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="141448.15"/>	<input type="text" value="518103.86"/>
(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="210284.15"/>	<input type="text" value="555559.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="103290.92"/>	<input type="text" value="448566.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="106993.23"/>	<input type="text" value="106993.23"/>
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 Academy of Dermatology Association Political Action Committee (SkinPAC)

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).....	132019.66	466802.87
(ii) Unitemized	9428.49	50300.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	141448.15	517103.86
(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)	141448.15	517103.86
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
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)).....▶	141448.15	518103.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	141448.15	518103.86

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	2290.92	10566.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2290.92	10566.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	101000.00	411000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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 (Including Non-Federal Donations).....	0.00	27000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	103290.92	448566.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103290.92	448566.58

DETAILED SUMMARY PAGE
of Disbursements

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)	141448.15	517103.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	141448.15	517103.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2290.92	10566.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2290.92	10566.58

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Abele, Matthew, Karl, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3767 W Jackson Blvd
 City Mountain Brk State AL Zip Code 35213-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 05 / 2018
Transaction ID : A9AD0737FC9986F15B3
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Ackerman, Lindsay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6250 N 51st PI
 City Paradise Valley State AZ Zip Code 85253-4133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US Dermatology Partners Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 14 / 2018
Transaction ID : 6BBC511D-5081-4FB8-
 Amount of Each Receipt this Period 275.00
 Memo Item

C. Asarch, Adam, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4362 Cascade Rd SE Ste 206
 City Grand Rapids State MI Zip Code 49546-3670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forefront Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 13 / 2018
Transaction ID : B522BB84-DF27-42E0-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1775.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Asgari, Maryam, Mandana, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 Beverly Rd
 City Chestnut Hill State MA Zip Code 02467-3104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mass General Hospital Occupation (for Individual) Research Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 14 / 2018
Transaction ID : 7EA7A4CE-25AF-4590-
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Auh, Sogyong, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2051 Plainfield Rd
 City Crest Hill State IL Zip Code 60403-1865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Premier Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 3E743554-249D-41F4-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Awadalla, Farah, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21440 Casino Ridge Rd
 City Yorba Linda State CA Zip Code 92887-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coast Dermatology & Laser Surgery Cent Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 10 / 2018
Transaction ID : FB4C6D76-7644-4EE0-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	851.00
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 8 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Baker, Brian, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 Pole Bridge Rd
 City Nancy State KY Zip Code 42544-8505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology of Southern Kentucky Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : CFE0FBC73CFCD13B035
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Bar, Anna, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3303 SW Bond Ave Mail CodeCH 5D
 City Portland State OR Zip Code 97239-4501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHSU Dept of Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2018
Transaction ID : AD46C10C-DDAE-4580-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Barrett, Sharon, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 E Main St Ste 101
 City Clinton State CT Zip Code 06413-2058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brookwood Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2018
Transaction ID : 5672E7D6-B86B-49B4-
 Amount of Each Receipt this Period 250.00
 Memo Item

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 9 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Bean, Andrew, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6000 University Ave
 Ste 450
 City West Des Moines State IA Zip Code 50266-8229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology PC Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 798BE1448CEB98C1831
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Berg, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6819 21st Ave NE
 City Seattle State WA Zip Code 98115-6949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Polyclinic Mohs Surgery Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 558F499CD785631D4B1
 Amount of Each Receipt this Period 500.00
 Memo Item

c. Bhatt, Roopal, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10621 Milky Way
 City Austin State TX Zip Code 78730-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Four Points Dermatolgoy Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 21 / 2018
Transaction ID : D17E3677-62C9-4CEE-
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Blalock, Travis, Wayne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 Clifton Rd NE
 City Atlanta State GA Zip Code 30322-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Emory University Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2018
Transaction ID : 5E71229C3E8587B3CE8
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Boler, Patrick, Lynn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 Highway 80 E
 City Clinton State MS Zip Code 39056-5252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Magnolia Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2018
Transaction ID : B655DF78-42F5-4A76-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Bordeaux, Jeremy, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2741 Ashley Rd
 City Shaker Heights State OH Zip Code 44122-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Univ Hospitals Case Medical Center CWRU Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 15 / 2018
Transaction ID : 90DAF56D-88A9-4508-
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Bradley, Laurence, M, , Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1204 W Poplar Woods Ct

City Dunlap	State IL	Zip Code 61525-9210
----------------	-------------	------------------------

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

Name of Employer (for Individual) Soderstrom Skin Institute	Occupation (for Individual) Dermatologist
--	--

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	/	2018

Transaction ID : 98652897D04632FCF85

Amount of Each Receipt this Period
250.00

Memo Item

B. Braza, Thomas, James, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 814 Spivey Rd

City Whiteville	State NC	Zip Code 28472-8736
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Bluewater Dermatology and Skin Cancer	Occupation (for Individual) Dermatologist
--	--

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	/	2018

Transaction ID : 4DEAEE15-0F17-47B8-

Amount of Each Receipt this Period
500.00

Memo Item

C. Brewer, Jerry, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 1st St SW
Mayo Building E-5 Dept of Dermatol

City Rochester	State MN	Zip Code 55905-0001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Mayo Clinic	Occupation (for Individual) 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	/	21	/	2018

Transaction ID : E6C33435-BC14-4762-

Amount of Each Receipt this Period
500.00

Memo Item

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 12 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Bright, Nicole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 630 Nesting Ln
 City Middletown State DE Zip Code 19709-6124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Vause Dermatology and Cosmetic Surgery Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2018
Transaction ID : E0A1CE3BACE717027F5
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Brodland, David, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 Coal Valley Rd Ste 360
 City Jefferson Hills State PA Zip Code 15025-3739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 South Hills Medical Building Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 05610736D40570940C3
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Burr, Randall, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1618 S Millenium Way Ste 100
 City Meridian State ID Zip Code 83642-6457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Ada West Dermatology Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 17 / 2018
Transaction ID : BCB14531-B0B4-4913-
 Amount of Each Receipt this Period 251.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5751.00
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 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Callender, Valerie, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12200 Annapolis Rd
 Ste 315
 City Glenn Dale State MD Zip Code 20769-9182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 26 / 2018
Transaction ID : E929FB9D-EDBD-4A98-
 Amount of Each Receipt this Period 750.00
 Memo Item

B. Campanelli, Carmen, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Shadow Ln
 City Chadds Ford State PA Zip Code 19317-9334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Yardley Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 03 / 2018
Transaction ID : 5EFB5659-69AB-43C9-
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Capek, Marilyn, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 955 Main St
 Ste 308
 City Winchester State MA Zip Code 01890-4303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 0BD97CE1-FFCB-4DAE-
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4250.00
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 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Casey, Angela, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5148 Abbotsbury Ct
 City New Albany State OH Zip Code 43054-9357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Center for Surgical Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 18BEC3EB6F1B6B3A7E9
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Chan, Joanna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1867 Lucile Ave
 City Los Angeles State CA Zip Code 90026-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Laser Skin Care Center Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : E874A1998A00ED82DB3
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Chastain, Mark, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 835 Cogburn Ave NW Ste 100
 City Marietta State GA Zip Code 30060-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skin Cancer Specialists, P.C. Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 15 / 2018
Transaction ID : 013EC491-31CE-46D1-
 Amount of Each Receipt this Period 1500.00
 Memo Item

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: (check only one)	PAGE 15 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Chow, Jim, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Richland Med Pk Dr
 Ste 500
 City Columbia State SC Zip Code 29203-6854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : A134526DED8AEF45340
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Chung, Vinh, Quoc, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5075 Gibson Lake Ct
 City Colorado Springs State CO Zip Code 80924-8200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vanguard Skin Specialists Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : EDA9F693C3CA41A460F
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Clark, Ashlyne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Rainbow Ct SE
 City Cedar Rapids State IA Zip Code 52403-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forefront Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 07 / 2018
Transaction ID : 53019521-EEE6-4551-
 Amount of Each Receipt this Period 251.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2251.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Clever, Henry, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 375 Jungs Station Rd
 City Saint Charles State MO Zip Code 63303-6253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) First Capitol Dermatology, LLC Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 25 / 2018
Transaction ID : 17C7B357692B63F76F3
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Cогnetta, Armand, B., , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1714 Mahan Center Blvd
 City Tallahassee State FL Zip Code 32308-5427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Assoc of Tallahassee Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2018
Transaction ID : 04C2CB76-9072-4AA9-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Cohen, Joel, Lee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5340 S Quebec St Ste 300S
 City Greenwood Village State CO Zip Code 80111-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AboutSkin Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2018
Transaction ID : A1FA661185D4BECB006
 Amount of Each Receipt this Period 250.00
 Memo Item

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 17 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Comstock, Jody, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6127 N La Cholla Blvd
 Ste 101
 City Tucson State AZ Zip Code 85741-3744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 14 / 2018
Transaction ID : 33B0B21F-6A41-4E31-
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Cooper, Jennifer, Zahn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 735 Chapel Ridge Rd
 City Lutherville State MD Zip Code 21093-1898
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Dermatology Hunt Valley Occupation (for Individual) Assistant Professor of Dermatology
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 27F99996C5962EA78F5
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Countryman, Nicholas, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8801 N Meridian St
 Ste 207
 City Indianapolis State IN Zip Code 46260-5315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dawes Fretzin Dermatology Group Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 03 / 2018
Transaction ID : 7EFA1A9C-D797-4E14-
 Amount of Each Receipt this Period 500.00
 Memo Item

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 18 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Curcio, Natalie, M., ,

Mailing Address 1715 Glen Echo Rd

City Nashville State TN Zip Code 37215-2909

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

Name of Employer (for Individual) Curcio Dermatology, P.C. Occupation (for Individual) Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 04 / 2018
Transaction ID : A9186844754422EE9ED

Amount of Each Receipt this Period
 500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Davis, Ira, C., ,

Mailing Address 203 E 72nd St Apt 9B

City New York State NY Zip Code 10021-4562

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

Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 04 / 2018
Transaction ID : C997C20FB40CAF06B9F

Amount of Each Receipt this Period
 500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Debloom, James, R., ,

Mailing Address 300 Ashby Park Ln

City Greenville State SC Zip Code 29607-6903

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

Name of Employer (for Individual) South Carolina Skin Cancer Center Occupation (for Individual) Physician

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 14 / 2018
Transaction ID : 71A0B07F-ED52-4C8B-

Amount of Each Receipt this Period
 500.00

Memo Item

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: (check only one)	PAGE 19 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Deignan, Eileen, Matilda, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 Baker Ave
 City Concord State MA Zip Code 01742-2189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1100.00

Date of Receipt 05 / 13 / 2018
Transaction ID : 38C3F44E-2BC4-46F2-
 Amount of Each Receipt this Period 1100.00
 Memo Item

B. Dimarco, Christopher, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 593 Eddy St APC 10
 City Providence State RI Zip Code 02903-4923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brown Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 3B0FBD87-919C-4FA4-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Diven, Dayna, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 E 15th St Dept of Dermatology, Cec C2.470
 City Austin State TX Zip Code 78701-1930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Univ of Texas at Austin-Dell Medic Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 6277847B-4804-40A0-
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1900.00
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 20 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Doherty, Mark, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 12th St
 City Bellingham State WA Zip Code 98225-6213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology and Laser Center NW Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2018
Transaction ID : C8EA0D3565601E5C277
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Doughty-McDonald, Lauren, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2448 Dempster Dr
 City Coralville State IA Zip Code 52241-9715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Clinic of Iowa Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 9D8E3BAD-DAA3-4AA3-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Dozier, Susan, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8240 N Mopac Expy Ste 355
 City Austin State TX Zip Code 78759-8894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatological Surgeon
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 16 / 2018
Transaction ID : 72CA4A7D-099A-4F0B-
 Amount of Each Receipt this Period 1000.00
 Memo Item

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 21 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Dunn, Cary, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4411 Bee Ridge Rd
 City Sarasota State FL Zip Code 34233-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Epiphany Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 155D4DB3-79D9-472F-
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Esser, Adam, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13110 Bloomfield St
 City Sherman Oaks State CA Zip Code 91423-3206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 42DEDF31EB1967FD646
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Fazio, Michael, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2805 J St Ste 100
 City Sacramento State CA Zip Code 95816-4307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Michael J. Fazio, MD, Inc. Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 2B2F2324DB4A116D828
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
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 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Fish, Frederick, S., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18315 Cascade Dr
 Ste 150
 City Eden Prairie State MN Zip Code 55347-1185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Associated Skin Care Spec Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 6BCEA465-93DD-4D31-
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Fleischli, Mary, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5924 Royal Ln
 Ste 104
 City Dallas State TX Zip Code 75230-7891
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dallas Associated Dermatologists Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 7D496BA7-EAB5-46F1-
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Fredenberg, Mary, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14155 N 83rd Ave
 Ste 110
 City Peoria State AZ Zip Code 85381-5640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) North Valley Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 22 / 2018
Transaction ID : 9DD62BFC-8CB9-4B69-
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Gamber, Jennifer, Lynn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 Ridgely Ave
 Ste 120
 City Annapolis State MD Zip Code 21401-1077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Anne Anundel Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 5BA235DA-3C6E-478C-
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Geddes, Elizabeth, Rebecca, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8825 FM 2244 Rd
 City Austin State TX Zip Code 78746-4720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Westlake Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 5891D8D9-C768-41B8-
 Amount of Each Receipt this Period 400.00
 Memo Item

C. Girard, Julia, Griffin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 Sherwood Rd SW
 City Rome State GA Zip Code 30165-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Harbin Clinic Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2018
Transaction ID : A5424D59-D2E8-479D-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
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 24 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Goulder, Steven, Jay, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 W Superior St
 Unit 905
 City Chicago State IL Zip Code 60654-8135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Midwest Skin Cancer Institute, LLC Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 05 / 2018
Transaction ID : 132A36C8F4B9B196A62
 Amount of Each Receipt this Period 205.00
 Memo Item

B. Graves, Michael, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4419 Frontier Trl
 Ste 110
 City Austin State TX Zip Code 78745-1567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southwest Skin and Cancer Clinic Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 0BA90E0A457911E1AE0
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Greenberg, Michael, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 Suffield Ter
 City Northbrook State IL Zip Code 60062-3014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Illinois Dermatology Institute, LLC Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 4ACBAD10FD632D759450
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	755.00
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 25 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Greenway, Hubert, T., , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 946
 City Rancho Santa Fe State CA Zip Code 92067-0946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Scripps Clinic Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 572D6C12BBB59C6695D
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Griego, Robert, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6134 E Indian Bend Rd
 City Paradise Valley State AZ Zip Code 85253-3440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skin Cancer Specialists Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 05 / 2018
Transaction ID : 7391BF7257947FC9217
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Guevara, Adrian, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 Rocky Pointe Dr
 City El Paso State TX Zip Code 79912-7529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sun City Dermatology, PA Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2018
Transaction ID : 7FE7E35D1F3F98A01E6
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Guitart, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 676 N Saint Clair St
 Ste 1600
 City Chicago State IL Zip Code 60611-2997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 2C235916-F6DF-425A-
 Amount of Each Receipt this Period 260.00
 Memo Item

B. Haas, Ann, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8466 Scenic Vista Way
 City Fair Oaks State CA Zip Code 95628-3869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ft Sutter Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 30 / 2018
Transaction ID : 4759995D4BB32A3EED77
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Hamman, Michael, Shane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 Beryl St
 City San Diego State CA Zip Code 92109-2048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Yuma Dermatology Occupation (for Individual) Dermatology Resident
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 11 / 2018
Transaction ID : 38F3B834-8360-4211-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	885.00
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 27 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Hamzavi, Iltefat, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 285 N Lilley Rd

City Canton	State MI	Zip Code 48187-3907
----------------	-------------	------------------------

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

Name of Employer (for Individual) Dermatology Specialist of Canton Hamza	Occupation (for Individual) 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		25		2018

Transaction ID : 609A6476-E53E-4D80-

Amount of Each Receipt this Period
500.00

Memo Item

B. Harrington, Allan, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 703 Giddings Ave
Ste M

City Annapolis	State MD	Zip Code 21401-1437
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Anne Arundel Dermatology	Occupation (for Individual) Mohs Surgeon
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2018

Transaction ID : 45D61F1A-0101-4B0B-

Amount of Each Receipt this Period
3000.00

Memo Item

C. Hartford, Orville, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 381 Main St

City Orono	State ME	Zip Code 04473-3446
---------------	-------------	------------------------

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

Name of Employer (for Individual) Penobscot Valley Dermatology	Occupation (for Individual) 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		07		2018

Transaction ID : E3CC098B-9555-432F-

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3800.00
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 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Harvey, David, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Diamond Pt
 City Fayetteville State GA Zip Code 30215-5149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Institute For Skin Cancer Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 23 / 2018
Transaction ID : 4CF3B30758D56B41829D
 Amount of Each Receipt this Period 83.33
 Memo Item

B. Heilman, Edward, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 E End Ave Apt 33C
 City New York State NY Zip Code 10028-7946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2018
Transaction ID : B4BCF8AB-C07D-4BFB-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Henry, Lance, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1444 E Stearns St Ste 11
 City Fayetteville State AR Zip Code 72703-4969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Dermatology & Skin Cancer Cen Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 05 / 2018
Transaction ID : 5A6CE7B0-B76E-4952-
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2333.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Herman, Alysa, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 San Lorenzo Ave
 Ste 700
 City Coral Gables State FL Zip Code 33146-1876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 13 / 2018
Transaction ID : FE09C751-322C-4586-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Herrmann, James, John, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 W Wiesbrook Rd
 City Wheaton State IL Zip Code 60189-7814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 5DC928A9-6EE8-4530-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Hinckley, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2309 E Edgemoor Dr
 City Salt Lake City State UT Zip Code 84117-6229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Granger Medical Center Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 5390EE8247F24E2E5D0
 Amount of Each Receipt this Period 500.00
 Memo Item

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 30 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Hines, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Milford St
 Ste 301
 City Salisbury State MD Zip Code 21804-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peninsula Dermatology Assoc. PA Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 31 / 2018
Transaction ID : 43ECB2CFF4362A4EBB97
 Amount of Each Receipt this Period 83.33
 Memo Item

B. Ho, Stephen, Chia-Jen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6535 S Adams Ct
 City Centennial State CO Zip Code 80121-3610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) About Skin Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 18 / 2018
Transaction ID : A1932841-3ABE-49B3-
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Hooper, Deirdre, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3525 Prytania St
 Ste 501
 City New Orleans State LA Zip Code 70115-8129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Audubon Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2018
Transaction ID : 6D0D75B5-D611-495E-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 883.33
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Horan, Douglas, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1550 Midway Pl
 City Menasha State WI Zip Code 54952-1165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 05 / 05 / 2018
Transaction ID : 89F49833A72DC3530DA
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Horton, Sharon, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 E Wilson St Ste 190
 City Batavia State IL Zip Code 60510-2478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 05 / 25 / 2018
Transaction ID : FF1A2500F84FAC73778
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Housman, Tamara, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3811 Ed Dr Ste 110
 City Raleigh State NC Zip Code 27612-2393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Raleigh Skin Surgery Center, PLLC Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 05 / 14 / 2018
Transaction ID : B51AB89A-5566-4DB8-
 Amount of Each Receipt this Period
 500.00
 Memo Item

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 32 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Hren, Catherine, Madeline, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Crimmons Cir
 City Cary State NC Zip Code 27511-5553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cary Dermatology Center Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 15 / 2018
Transaction ID : 24A60EDD-ACBC-483A-
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Hughes, Matthew, Preston, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 835 Cogburn Ave NW Ste 100
 City Marietta State GA Zip Code 30060-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skin Cancer Specialists Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 3866E661-31FD-4A29-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Hull, Cheryl, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 NE Chapel Hill Dr
 City Bentonville State AR Zip Code 72712-8439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hull Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2018
Transaction ID : B6C329CFD268B3CB6A6
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	775.00
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 33 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Iacobellis, Francis, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 E 88th St
 City New York State NY Zip Code 10128-2270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt **05 / 17 / 2018**
Transaction ID : 97F7E9A443F73BC0458
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Ibrahimi, Omar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 999 Summer St Ste 305
 City Stamford State CT Zip Code 06905-5513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Connecticut Skin Institute Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 251.00

Date of Receipt **05 / 14 / 2018**
Transaction ID : 6FE397E9-16EA-4464-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Iorizzo, Luciano, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Saint Charles Way
 City York State PA Zip Code 17402-4643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of York Occupation (for Individual) Mohs Surgeon
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt **05 / 14 / 2018**
Transaction ID : 8DA83A2A-D1BE-4456-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1001.00
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 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Iyengar, Vivek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 E 6th St
 City Hinsdale State IL Zip Code 60521-4712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 04 / 2018**
Transaction ID : F7EEB83FAF9F20E60F2
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Jiang, Shang I., Brian, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8899 University Center Ln UCSD Procedural Dermatology, Ste 3
 City San Diego State CA Zip Code 92122-1010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Univ of California, San Diego Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt **05 / 18 / 2018**
Transaction ID : 31EAF47B-67FC-47EF-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Johnson, Brian, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 14308
 City Norfolk State VA Zip Code 23518-0308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Virginia Dermatology & Skin Cancer Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **05 / 05 / 2018**
Transaction ID : 948EAF11F0BE8E87B12
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5651.00
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 35 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Joo, Jayne, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3301 C St
 Dept of Dermatology, Ste 1400
 City Sacramento State CA Zip Code 95816-3367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Univ of California-Davis School of Med Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 9FD1F6FC-3FF8-4573-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Kaufman, Andrew, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 Calle Las Casas
 City Thousand Oaks State CA Zip Code 91360-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Center for Dermatology Care Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 5C6CABE7E1E4EDA90EF
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Keough, George, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12224 Ansley Ct
 City Knoxville State TN Zip Code 37934-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Knoxville Dermatology Group Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 05 / 16 / 2018
Transaction ID : 76744396-BCA4-4167-
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1900.00
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 36 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Kerchner, Katherine, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12666 Amberset Dr
 City Knoxville State TN Zip Code 37922-5371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of Oak Ridge Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 1BFB08905A5F5259055
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Kline, Laura, McCaskill, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9108 Shorewood Pl
 City Belmont State NC Zip Code 28012-7635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Piedmont Plastic Surgery & Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2018
Transaction ID : FAE911FA475E621A41D
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Konda, Sailesh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4037 NW 86th Ter
 FI 4
 City Gainesville State FL Zip Code 32606-9277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UF Health Dermatology - Springhill Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 07 / 2018
Transaction ID : 24410E35-E94C-487C-
 Amount of Each Receipt this Period 500.00
 Memo Item

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 37 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Laumann, Anne, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 E Huron St
 Apt 2705
 City Chicago State IL Zip Code 60611-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Dept Northwestern Univ. Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2018
Transaction ID : E0693952-6883-46FB-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Ledbetter, Leslie, Shook, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9303 Pinecroft Dr
 Ste 150
 City The Woodlands State TX Zip Code 77380-3183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 14 / 2018
Transaction ID : 0CE99FEC-BA34-4894-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Lee, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 Boston Providence Tpk
 Ste 16
 City Norwood State MA Zip Code 02062-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greater Metro West Derm Surgeons, LLC Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 13 / 2018
Transaction ID : 0CC67066-4D39-4F1F-
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1751.00
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 38 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Lee, Ken, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4057 Pfeifer Ct
 City Lake Oswego State OR Zip Code 97035-2415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Portland Dermatology Clinic Dermatologist
 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 / 2018
Transaction ID : 8F6DB17F909F04C819D
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Lim, Scott, J. M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3243 W 26th St
 City Erie State PA Zip Code 16506-2507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self Employed Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2018
Transaction ID : 087A39ED-B061-4519-
 Amount of Each Receipt this Period
 251.00
 Memo Item

C. Machler, Brian, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 Columbia Tpke Ste 200
 City Florham Park State NJ Zip Code 07932-2283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Center for Dermatology, PA Dermatologist
 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 / 2018
Transaction ID : E014BB18-E22A-4A0B-
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1251.00
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 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Marty, Chelsy, Lyn, ,		Date of Receipt MM / DD / YYYY 05 / 07 / 2018 Transaction ID : AE6963D7-41D0-452D-
Mailing Address 3243 Old Barn Rd W		Amount of Each Receipt this Period 500.00
City Ponte Vedra Beach	State FL	Zip Code 32082-3717
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Dermatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McCarty, James, Richmond, ,		Date of Receipt MM / DD / YYYY 05 / 12 / 2018 Transaction ID : 60EB47D8-6D18-47F5-
Mailing Address 4365 S Hulen St		Amount of Each Receipt this Period 300.00
City Fort Worth	State TX	Zip Code 76109-4917
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) U.S. Dermatology Partners	Occupation (for Individual) Dermatologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mekelburg, Brian, P., ,		Date of Receipt MM / DD / YYYY 05 / 13 / 2018 Transaction ID : 02B5108C-2526-4D2F-
Mailing Address 8631 W 3rd St Ste 1035		Amount of Each Receipt this Period 250.00
City Los Angeles	State CA	Zip Code 90048-5964
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self Employed	Occupation (for Individual) 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).....▶	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 40 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Mezebish, David, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2417 Sapling Ridge Ln
 City Brookeville State MD Zip Code 20833-1830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Maryland Skin Cancer Specialists Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2018
Transaction ID : F80B3EEDFF14FE4BC77
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Miller, Elaine, Kay, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1841 Martin Dr Ste 200
 City Weatherford State TX Zip Code 76086-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Dermatology Spot Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 13 / 2018
Transaction ID : 8B3CA2B8-A7BE-432E-
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Miller, Lee, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3807 Burgoyne Dr
 City Lake Charles State LA Zip Code 70605-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of SWLA Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : D985AB7EB2F961FD4A1
 Amount of Each Receipt this Period 500.00
 Memo Item

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 41 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Miller, Richard, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8220 US Highway 19
 City Port Richey State FL Zip Code 34668-6639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Largo Medical Center/NSUCOM Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 3C241F34-306F-4AAD-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Mina, Mary Alice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5555 Peachtree Dunwoody Rd Ste 206
 City Atlanta State GA Zip Code 30342-1711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baucom And Mina Derm Surgery, LLC Occupation (for Individual) Mohs Surgeons
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2018
Transaction ID : 493B0939-DDE0-4061-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Minkis, Kira, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 435 E 70th St Apt 17D
 City New York State NY Zip Code 10021-5345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Weill Cornell Medical College Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 651D34E26C4DB3D760C
 Amount of Each Receipt this Period 250.00
 Memo Item

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 42 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Mishra, Vineet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 E Basse Rd
 Apt 1535
 City San Antonio State TX Zip Code 78209-8392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Texas Health Science Cen Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2018
Transaction ID : D5220D5097DF2972C7A
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Moiin, Ali, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 Three Mile Dr
 City Grosse Pointe Park State MI Zip Code 48230-1414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A Comprehensive Dermatology Center Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 08 / 2018
Transaction ID : 2D5C5B993DF0ED8B915
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Moul, Danielle, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 Hawthorne Rd
 City Laguna Beach State CA Zip Code 92651-1520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Danielle K Moul, MD, INC Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2018
Transaction ID : EEEA4FBE-A401-4A8D-
 Amount of Each Receipt this Period 250.00
 Memo Item

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 43 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Neckman, Julia, Pettersen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 E 70th St
 Apt 10E
 City New York State NY Zip Code 10021-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schweiger Dermatology Group Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2018
Transaction ID : F00CD744A59AF2CCA4B
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Nichols, George, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 Lindell Dr
 City Columbia State MO Zip Code 65203-2731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nichols Mohs and Skin Surgery PC Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 05 / 2018
Transaction ID : FABEA3140C2BF9B0CAD
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Obagi, Suzan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Woodland Rd
 City Pittsburgh State PA Zip Code 15232-2816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPMC Cosmetic Surgery & Skin Health Ct Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2018
Transaction ID : C0F93605-C320-45A7-
 Amount of Each Receipt this Period 500.00
 Memo Item

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 44 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Olansky, David, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3379 Peachtree Rd NE
 Peachtree Lenox Building, Ste 500
 City Atlanta State GA Zip Code 30326-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olansky Dermatology Associates, P.C. Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : EEB71104F3E71596A38
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Olson, Jonathan, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 Templeton Ave
 City Charlotte State NC Zip Code 28203-4554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatologic Surgery of the Carolinas, Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 61A2673E68795F39269
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Patel, Purvisha, Jitendra, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5915 River Oaks Rd
 City Memphis State TN Zip Code 38120-2522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Dermatology and Skin Cancer C Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 05 / 2018
Transaction ID : A1313546523A6994739
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 45 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Pattee, Sean, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1348 N Union Rd
 City Manitowoc State WI Zip Code 54220-9451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of Wisconsin, S Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **05 / 09 / 2018**
Transaction ID : BA6AC0F8DAF81FD5EA2
 Amount of Each Receipt this Period **5000.00**
 Memo Item

B. Peebles, Jon, Klint, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8850 Blackhawk Rd Apt 505
 City Middleton State WI Zip Code 53562-4437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Univ of Wisconsin Hospital and Clinics Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 17 / 2018**
Transaction ID : BF073E9D-A53F-4CE1-
 Amount of Each Receipt this Period **150.00**
 Memo Item

C. Pendharkar, Ninad, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Saint Charles Way
 City York State PA Zip Code 17402-4643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of York Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 21 / 2018**
Transaction ID : 71882827-3F11-4244-
 Amount of Each Receipt this Period **300.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5450.00
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 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Pierre, Peterson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 Rolling Oaks Dr
 Ste 207
 City Thousand Oaks State CA Zip Code 91361-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pierre Skin Care Institute Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2018
Transaction ID : 7407B0FB-83A4-40E9-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Pitt, Alan, J. A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1618 S Millenium Way
 Ste 100
 City Meridian State ID Zip Code 83642-6457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ada West Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 18 / 2018
Transaction ID : 5B3A0FFE-1156-4224-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Portnoff, Lee, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Dunleith Dr
 City Saint Louis State MO Zip Code 63124-1896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 25 / 2018
Transaction ID : 2E704A83BF9225336C5
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1751.00
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 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Potozkin, Jerome, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 San Ramon Valley Blvd
 Ste 102
 City Danville State CA Zip Code 94526-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 18 / 2018
Transaction ID : OCD2AC42-B2B6-4858-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Potts, Geoffrey, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 917 W Peninsula Ct
 City Oxford State MI Zip Code 48371-6727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wayne State University Physician Group Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 251.00

Date of Receipt 05 / 19 / 2018
Transaction ID : 0156CA62-4711-4039-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Prado De Fuccio Oliveira, Renata, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9155 Lizard Rock Trl
 City Colorado Springs State CO Zip Code 80924-2922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vanguard Skin Specialists Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 260.00

Date of Receipt 05 / 28 / 2018
Transaction ID : 037E17D5-4E27-4419-
 Amount of Each Receipt this Period 260.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1011.00
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 48 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Prosise, Emily, Liga, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 Patterson Rd
 City Austin State TX Zip Code 78733-6508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Austin Dermcare Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 12 / 2018
Transaction ID : D92769D0-3E52-4A0A-
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Rackett, Scott, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2809 N Sepulveda Blvd Ste A
 City Manhattan Bch State CA Zip Code 90266-2727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Manhattan Beach Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 22 / 2018
Transaction ID : 72D4F900-60BF-4651-
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Ramsay, Catherine, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2945 Claremont Blvd
 City Berkeley State CA Zip Code 94705-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Permanente Medical Group Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2018
Transaction ID : C72E6E192290589D292
 Amount of Each Receipt this Period 250.00
 Memo Item

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 49 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Ratner, Desiree, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 W 15th St
 City New York State NY Zip Code 10011-5903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Beth Israel Cancer Center Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 7D2ADF4203AE32B1344
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Robbins, Amber, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 N Brooks St
 City Sheridan State WY Zip Code 82801-3801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robbins Dermatology, PC Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 17 / 2018
Transaction ID : E1D8EEF8-D819-47FC-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Rogers, Cynthia, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8503 S US Highway 1 Ste 9
 City Port Saint Lucie State FL Zip Code 34952-3346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 277423EA-D01D-4E97-
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1501.00
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 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Rosen, Theodore, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2815 Plumb St
 City Houston State TX Zip Code 77005-3055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baylor Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 05 / 17 / 2018
Transaction ID : CFD316C8-6EEF-4D98-
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Rowe, Russell, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3113 River Place Dr
 City Belton State TX Zip Code 76513-1013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of Central Texa Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 25 / 2018
Transaction ID : AF401FD3BF8E4905BBA
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Sabin, Shawn, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11550 Granada St
 City Leawood State KS Zip Code 66211-1453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Derm & Skin Cancer Specialists Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 782043DF-8B11-45A8-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
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 51 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Saleeby, Eli, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1460 N University Drive
 City Coral Springs State FL Zip Code 33071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employee Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 05 / 2018
Transaction ID : 87EC3D649BACA9A63CE
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Saporito, Frank, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3887 Duchess Trl
 City Dallas State TX Zip Code 75229-5242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mohs Surgery, PLLC Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 16BEAD22-F090-4517-
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Schanbacher, Carl, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Isabella St Apt 2W
 City Boston State MA Zip Code 02116-5265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kuchnir Dermatology and Dermatologic S Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2018
Transaction ID : F933B6D3-47C4-4178-
 Amount of Each Receipt this Period 1000.00
 Memo Item

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: (check only one)	PAGE 52 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Schiro, James, Anthony, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19826 Cool Hollow Rd
 City Hagerstown State MD Zip Code 21740-1532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 25 / 2018
Transaction ID : 2C05684267EB0E2C9DF
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Schlick, Cynthia, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26060 Shorewood Oaks Dr
 City Excelsior State MN Zip Code 55331-8469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Park Nicollet Clinic Chanhassen Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 19 / 2018
Transaction ID : 26D81422-2308-4DA5-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Schram, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 E Calle Corta
 City Tucson State AZ Zip Code 85716-4910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pima Dermatology Occupation (for Individual) Pysician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.00

Date of Receipt 05 / 07 / 2018
Transaction ID : E2D13740-6859-4760-
 Amount of Each Receipt this Period 275.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 1525.00
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 53 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Schulz, Kimberly, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 5th St
 Ste 125
 City Coralville State IA Zip Code 52241-2934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Infinity Skin Care Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2018
Transaction ID : 4F5075BF-7F64-4974-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Sears, Joel, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1807 N Hutchinson Rd
 City Spokane Valley State WA Zip Code 99212-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Derm and Skin Surgery Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : A30B41A26C7C6758DB4
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Sevigny, Gina, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 Clyde Morris Blvd
 Ste 150
 City Ormond Beach State FL Zip Code 32174-8186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ormond Beach Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 16 / 2018
Transaction ID : DF49F5F5-C4A4-499C-
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1625.00
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 54 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Sheehan, Jessica, Maddox, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 Warrington Rd
 City Deerfield State IL Zip Code 60015-2332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SkinCare Physicians Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 37072DC4736CF4E1608
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Sigmon, Justin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Smokemont Dr
 City Arden State NC Zip Code 28704-7805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forest Dermatology, PA Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 1A89563D4515B465430
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Sills, Adam, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 Windover Rd
 City Jonesboro State AR Zip Code 72401-6007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sills Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 2AD736B2-04FB-4F6D-
 Amount of Each Receipt this Period 365.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5865.00
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 55 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Skinner, Daniel, Peterson, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 W Southern Ave
 Ste 101
 City Mesa State AZ Zip Code 85202-4736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skin Cancer Specialists Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 22 / 2018
Transaction ID : E80F655A-494F-4D71-
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Skolnik, Ira, Lawrence, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 747 Main St
 Ste 212
 City Concord State MA Zip Code 01742-3330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Family Dermatology, p.c. Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 12 / 2018
Transaction ID : 9D0E969A-492E-4A4F-
 Amount of Each Receipt this Period 101.00
 Memo Item

C. Snitzer, Lauren, Allyson, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4410 Westheimer Rd
 Apt 4416
 City Houston State TX Zip Code 77027-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US Dermatology Partners Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 266.68

Date of Receipt 05 / 11 / 2018
Transaction ID : 4C9FAFC5345AD01A0B15
 Amount of Each Receipt this Period 41.67
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1142.67
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 56 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Spencer, Brent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Victory Group Way
 Ste 200
 City Frisco State TX Zip Code 75034-6721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology & Skin Surgery Inst of N T Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 15 / 2018
Transaction ID : 7DB56A24-B76E-4F7D-
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Starling, John, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 Rickers Bay Rd
 City Neenah State WI Zip Code 54956-5016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of Wisconsin, S Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : E0D536051583E9F084B
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Stebbins, William, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 719 Thompson Ln
 Dept of Dermatology, Ste 26300
 City Nashville State TN Zip Code 37204-4679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vanderbilt Univ Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2018
Transaction ID : 9616C940-A7B7-4B91-
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3300.00
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 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Stephens, John, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10553 Hyde Park
 City Carmel State IN Zip Code 46032-8300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Inc Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 13 / 2018
Transaction ID : F6F836E7-813C-4EAF-
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Stetson, Cloyce, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 4th St Dept 9400
 City Lubbock State TX Zip Code 79430-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Texas Tech Univ Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 14 / 2018
Transaction ID : A11A772E-6A57-44B7-
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Stocker, Allison, Jones, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 Lexington Ave
 City San Antonio State TX Zip Code 78215-1930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 05 / 18 / 2018
Transaction ID : 6EC02054-87A0-4687-
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
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 58 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Stoddard, Earl, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 147 W Chubbuck Rd
 Ste A
 City Chubbuck State ID Zip Code 83202-2314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Idaho Skin Institute Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2018
Transaction ID : C0C0DD28-7EA7-41FA-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Stone, Jenny, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9903 Strike the Gold Ln
 City Waxhaw State NC Zip Code 28173-8083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Westgate Dermatology & Laser Center Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2018
Transaction ID : 426D2BD2CD78B007464
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Tanzi, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5471 Wisconsin Ave
 Ste 200
 City Chevy Chase State MD Zip Code 20815-3546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Capital Laser & Skin Care Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2018
Transaction ID : B1AC7D2B-5E08-402B-
 Amount of Each Receipt this Period 500.00
 Memo Item

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 59 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Taylor, Susan, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Anton Rd
 City Wynnewood State PA Zip Code 19096-1206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 09 / 2018
Transaction ID : BB6950C2-81F1-4142-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Ter Poorten, Jon, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 Penny Ln
 City Concord State NC Zip Code 28025-1221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Group of the Carolinas Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 21 / 2018
Transaction ID : D3E969B7-0368-4D59-
 Amount of Each Receipt this Period 251.00
 Memo Item

C. Thosani, Maya, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8900 N 65th St
 City Paradise Valley State AZ Zip Code 85253-1868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Spectrum Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : A880B0E7F8C513FFE46
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1251.00
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 60 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Tyler, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 Neil Ave
 City Columbus State OH Zip Code 43215-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 12 / 2018
Transaction ID : AEBB0832-0074-4BEA-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Van Beek, Marta, Jane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 Woolf Ave
 City Iowa City State IA Zip Code 52246-2442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Derm U of IA Hosp and Clinics Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 05 / 04 / 2018
Transaction ID : C9F698F039ACDF7CC9D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Van Meter, Thomas, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 S Patterson Ave Ste 105
 City Santa Barbara State CA Zip Code 93111-2475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 20 / 2018
Transaction ID : A64AF022-395B-48DA-
 Amount of Each Receipt this Period 500.00
 Memo Item

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 61 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Wasserman, Daniel, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8625 Collier Blvd
 City Naples State FL Zip Code 34114-3550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skin Wellness Physicians Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 24 / 2018
Transaction ID : 049A5273-8525-4DF2-
 Amount of Each Receipt this Period 1200.00
 Memo Item

B. Webster, Stephen, Burtis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N2062 Wedgewood Dr E
 City La Crosse State WI Zip Code 54601-7175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gundersen Clinic-Onalaska Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2018
Transaction ID : A5E0B527B95B5FB1EAA
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Weinstein, Andrew, Hart, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3285 Equestrian Dr
 City Boca Raton State FL Zip Code 33434-3361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Boynton Beach Skin Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 333.32

Date of Receipt 05 / 13 / 2018
Transaction ID : 4308A5522302DE4FD07A
 Amount of Each Receipt this Period 83.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1433.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Weiss, Margaret, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 Scott Adam Rd
 Ste 301
 City Hunt Valley State MD Zip Code 21030-3360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Maryland Laser, Skin & Vein Institute, Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2018
Transaction ID : 732F23E0-5F67-476C-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Weiss, Robert, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 Scott Adam Rd
 Ste 301
 City Hunt Valley State MD Zip Code 21030-3360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Maryland Dermatology Laser Skin & Vein Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 18 / 2018
Transaction ID : 09352E20-3593-49A9-
 Amount of Each Receipt this Period 2500.00
 Memo Item

c. Wells, Gregory, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2061 E Taconic Dr
 City Meridian State ID Zip Code 83642-9066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ada West Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 17 / 2018
Transaction ID : 65249D3F-D30E-43B9-
 Amount of Each Receipt this Period 251.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3251.00
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 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Wentzell, J., Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 Minnesota Ave
 City Anacortes State WA Zip Code 98221-4536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 05 / 2018
Transaction ID : 0F4471AD-808D-4507-
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Willard, Robert, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3960 S Mallard Ln
 City Doylestown State PA Zip Code 18902-1281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology & Mohs Surgery Center, PC Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : 9559C7142A1EF53BA17
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Winton, George, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 N State of Franklin Rd
 City Johnson City State TN Zip Code 37604-3693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tri-Cities Skin and Cancer Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 21 / 2018
Transaction ID : 8A4C3D03-3CE4-4F11-
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
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 64 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Woodhouse, Justin, Gary, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 Hillcreek Ln
 City Gates Mills State OH Zip Code 44040-9630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allied Dermatology and Skin Surgery Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 12 / 2018
Transaction ID : 30FF8508-9D49-44A4-
 Amount of Each Receipt this Period 4500.00
 Memo Item

B. Wysong, Ashley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 N Happy Hollow Blvd
 City Omaha State NE Zip Code 68132-2168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Nebraska Medical Center Occupation (for Individual) Director of Dermatologic Surgery
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2018
Transaction ID : C670CDAF40472243802
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Xu, Yaohui, Gloria, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 S Park St FI 7
 City Madison State WI Zip Code 53715-1375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UW Dept of Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 362ACD0A-F1C3-4446-
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 65 OF 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Zelac, Daniel, Ethan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1397
 City La Jolla State CA Zip Code 92038-1397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Scripps Clinic Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **05 / 04 / 2018**
Transaction ID : 60EBD4B5A01A627B29D
 Amount of Each Receipt this Period **1500.00**
 Memo Item

B. Zitelli, John, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1170 Meridian Dr
 City Presto State PA Zip Code 15142-1030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **05 / 05 / 2018**
Transaction ID : 174ED058F5AC246D764
 Amount of Each Receipt this Period **1000.00**
 Memo Item

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	132019.66

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City
Phoenix

State
AZ

Zip Code
85072

Purpose of Disbursement
Amex Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C [REDACTED]

Transaction ID : VCF82F129C

Amount of Each Disbursement this Period

[REDACTED] 261.07

Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
VS/MC Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2018

FEC Identification Number

C [REDACTED]

Transaction ID : V075825F81F

Amount of Each Disbursement this Period

[REDACTED] 374.44

Memo Item

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address PO Box 6603

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
VS/MC Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2018

FEC Identification Number

C [REDACTED]

Transaction ID : V7B186A4C8

Amount of Each Disbursement this Period

[REDACTED] 1655.41

Memo Item

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

[REDACTED] 2290.92

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

[REDACTED] 2290.92

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Ann Wagner For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2018

Mailing Address PO Box 50

FEC Identification Number

C	C00495846
Transaction ID : 17DDE73BCC	
Amount of Each Disbursement this Period	
	1000.00

City Ballwin State MO Zip Code 63022

Purpose of Disbursement
2018 General

011
Category/ Type

Candidate Name
Wagner, Ann, Louise, ,

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Bill Flores For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

Mailing Address PO Box 6207

FEC Identification Number

C	C00472241
Transaction ID : AE52E7B9E2I	
Amount of Each Disbursement this Period	
	1000.00

City Bryan State TX Zip Code 77805

Purpose of Disbursement
2018 General

011
Category/ Type

Candidate Name
Flores, William, H., ,

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

Memo Item

Full Name (Last, First, Middle Initial)

C. Billy Long For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2018

Mailing Address 3246 E Ridgeview St

FEC Identification Number

C	C00460063
Transaction ID : FD0828C430	
Amount of Each Disbursement this Period	
	1000.00

City Springfield State MO Zip Code 65804-4076

Purpose of Disbursement
2018 Primary

011
Category/ Type

Candidate Name
Long, William, H., , II

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

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Brian Higgins For Congress

Mailing Address P.O. Box 28

City Buffalo State NY Zip Code 14220

Purpose of Disbursement 2018 Primary

011
Category/
Type

Candidate Name Higgins, Brian, M., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NY District: 26

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00401034

Transaction ID : F907AF3955E

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Coffman For Congress 2018

Mailing Address 4950 S Yosemite Street F2 #511

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement 2018 Primary

011
Category/
Type

Candidate Name Coffman, Michael, H., ,

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

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00629287

Transaction ID : 46FC649AAD

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Crowley For Congress

Mailing Address 80-22 Northern Blvd.

City Jackson Heights State NY Zip Code 11372

Purpose of Disbursement 2018 General

011
Category/
Type

Candidate Name Crowley, Joseph, , ,

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00338954

Transaction ID : CD69190797I

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Darren Soto For Congress

Mailing Address P.O. Box 420239

City Kissimmee State FL Zip Code 34742

Purpose of Disbursement
2018 Primary

011
Category/
Type

Candidate Name
Soto, Darren, Michael, ,

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

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00581074

Transaction ID : 0A4421BAF5
Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Democrats Reshaping America (DREAMPAC)

Mailing Address PO Box 15320

City Washington State DC Zip Code 20003

Purpose of Disbursement
2018 Contribution

011
Category/
Type

Candidate Name
Democrats Reshaping America (DREAMPAC)

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

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2018

FEC Identification Number

C C00423079

Transaction ID : C6B77B4CCE
Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Denham For Congress

Mailing Address 2150 River Plaza Dr., #150

City Sacramento State CA Zip Code 95833

Purpose of Disbursement
2018 Primary

011
Category/
Type

Candidate Name
Denham, Jeffrey, John, ,

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00473272

Transaction ID : 58CD03E0D7
Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

6500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Donovan For Congress

Mailing Address PO Box 60530

City Staten Island State NY Zip Code 10306-1333

Purpose of Disbursement
2018 Primary

011
Category/
Type

Candidate Name
Donovan, Daniel, M., ,

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

State: NY District: 11

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2018

FEC Identification Number

C00571869

Transaction ID : 7A1666E9CD

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Dr John Joyce For Congress

Mailing Address 50 S Providence Road

City Media State PA Zip Code 19063

Purpose of Disbursement
2018 Primary

011
Category/
Type

Candidate Name
Joyce, John, , ,

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

State: PA District: 13

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2018

FEC Identification Number

C00674259

Transaction ID : BDDBE3F67F

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Fightin' Ninth Political Action Committee

Mailing Address PO Box 71596

City Richmond State VA Zip Code 23255-1596

Purpose of Disbursement
2018 Contribution

011
Category/
Type

Candidate Name
Fightin' Ninth Political Action Committee

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2018

FEC Identification Number

C00520841

Transaction ID : 4E5CC933F5

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of John Barrasso

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Barrasso, John, Anthony, ,

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

Date of Disbursement
MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number
C00436386
Transaction ID : 9A52491E680
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Raja For Congress

Mailing Address PO Box 681202

City Schaumburg State IL Zip Code 60168

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Krishnamoorthi, S. Raja, , ,

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

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number
C00575092
Transaction ID : E40A15A846E
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Sherrod Brown

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Brown, Sherrod, Campbell, ,

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

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number
C00264697
Transaction ID : BE76E06B14
Amount of Each Disbursement this Period
2500.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Hudson For Congress

Mailing Address PO Box 5053

City Concord State NC Zip Code 28027

Purpose of Disbursement 2018 General

011
Category/
Type

Candidate Name
Hudson, Richard, Lane, , Jr.

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

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00504522

Transaction ID : 0535213C05E

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jamie Raskin For Congress

Mailing Address P.O. Box 5418

City Takoma Park State MD Zip Code 20913

Purpose of Disbursement 2018 Primary

011
Category/
Type

Candidate Name
Raskin, Jamie, B., ,

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

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2018

FEC Identification Number

C C00575126

Transaction ID : 658B47CE20E

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Jason Smith For Congress

Mailing Address PO Box 1324

City Cape Girardeau State MO Zip Code 63702-1324

Purpose of Disbursement 2018 Primary

011
Category/
Type

Candidate Name
Smith, Jason, Thomas, ,

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

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2018

FEC Identification Number

C C00541862

Transaction ID : 2D099292F3

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Johnson For Congress

Mailing Address PO Box 906

City
Marietta

State
OH

Zip Code
45750

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Johnson, William, L., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2018

FEC Identification Number

C C00476820

Transaction ID : 0DB42FA623I

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Katherine Clark For Congress

Mailing Address PO Box 159

City
Belmont

State
MA

Zip Code
02478-9998

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Clark, Katherine, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MA District: 05

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00541888

Transaction ID : 4D28F5EECB

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LaHood for Congress

Mailing Address P.O. Box 10735

City
Peoria

State
IL

Zip Code
61612

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

LaHood, Darin, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2018

FEC Identification Number

C C00575050

Transaction ID : 21DF55D9AA

Amount of Each Disbursement this Period

2500.00

Memo Item

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Mark Pocan For Congress

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement
2018 Primary

011
Category/
Type

Candidate Name
Pocan, Mark, , ,

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

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00502179
Transaction ID : BF55BE2F2E
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Matsui For Congress

Mailing Address PO Box 1738

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Matsui, Doris, O., ,

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

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00409219
Transaction ID : 7072C2CD45I
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Burgess For Congress

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202-2334

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Burgess, Michael, Clifton, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TX District: 26

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00372532
Transaction ID : BEE0A96019
Amount of Each Disbursement this Period
2500.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Mike Bishop For Congress

Mailing Address PO Box 1148

City
Brighton

State
MI

Zip Code
48116-2748

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Bishop, Michael, D., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

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

FEC Identification Number

C C00561001

Transaction ID : ABB086FDFF

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City
Sacramento

State
CA

Zip Code
95841

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Thompson, Michael, C., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	1	8

FEC Identification Number

C C00326363

Transaction ID : D576089ECC:

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Montanans For Tester

Mailing Address PO Box 1135

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Tester, Jon, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	1	8

FEC Identification Number

C C00412304

Transaction ID : 948CA41B5E

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. New Pioneers PAC

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2018 Contribution

011
Category/
Type

Candidate Name
New Pioneers PAC

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00459123

Transaction ID : D268BE08E2
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Olson For Congress Committee

Mailing Address PO Box 16381

City Sugar Land State TX Zip Code 77496-6381

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Olson, Peter, Graham, ,

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

State: TX District: 22

Date of Disbursement

/ /

FEC Identification Number

C C00437913

Transaction ID : 8E5BDF416C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Pallone For Congress

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
2018 Primary

011
Category/
Type

Candidate Name
Pallone, Frank, , , Jr.

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

State: NJ District: 06

Date of Disbursement

/ /

FEC Identification Number

C C00226928

Transaction ID : 9C9B6E0805
Amount of Each Disbursement this Period

Memo Item

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. People For Ben

Mailing Address PO Box 31129

City
Santa Fe

State
NM

Zip Code
87594

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Lujan, Ben, Ray, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	23	/	2018

FEC Identification Number

C C00443689

Transaction ID : 9F3B75D25B1

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. People For Derek Kilmer

Mailing Address PO Box 1381

City
Tacoma

State
WA

Zip Code
98402

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Kilmer, Derek, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: WA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	23	/	2018

FEC Identification Number

C C00514893

Transaction ID : E07B64095Ae

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. People For Patty Murray

Mailing Address PO Box 3662

City
Seattle

State
WA

Zip Code
98124

Purpose of Disbursement
2022 Primary

011

Category/
Type

Candidate Name

Murray, Patricia, Lynn, ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: WA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	09	/	2018

FEC Identification Number

C C00257642

Transaction ID : B8404F3D31

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

6500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Ralph Abraham For Congress

Mailing Address P.O. Box 14062

City
Monroe

State
LA

Zip Code
71207-4062

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Abraham, Ralph, Lee, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: LA District: 05

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C00563940

Transaction ID : CCC10D9678

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Rely On Your Beliefs Fund

Mailing Address One Constitution Ave NE Ste 300

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Rely On Your Beliefs Fund

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C00344648

Transaction ID : 2181CA3913E

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Salud Carbajal For Congress

Mailing Address PO Box 1290

City
Santa Barbara

State
CA

Zip Code
93102

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Carbajal, Salud, O., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C00576041

Transaction ID : CDCFA8622I

Amount of Each Disbursement this Period

1000.00

Memo Item

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Schatz For Senate

Mailing Address PO Box 3828

City
Honolulu

State
HI

Zip Code
96812

Purpose of Disbursement
2022 Primary

011

Candidate Name

Schatz, Brian, Emanuel, ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: HI

District:

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00540732

Transaction ID : 3F63B58F929

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Serve America PAC

Mailing Address PO Box 2013

City
Salem

State
MA

Zip Code
01970

Purpose of Disbursement
2018 Contribution

011

Candidate Name

Serve America PAC

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00571174

Transaction ID : E17DFDBFFA

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Smucker For Congress

Mailing Address 548 Steel Way
PO Box 7066

City
Lancaster

State
PA

Zip Code
17604

Purpose of Disbursement
2018 Primary

011

Candidate Name

Smucker, Lloyd, K., ,

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: PA

District: 11

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2018

FEC Identification Number

C C00599464

Transaction ID : 7CE4D2967D

Amount of Each Disbursement this Period

3000.00

Memo Item

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

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

5000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Stabenow For US Senate

Mailing Address P.O. Box 4945

City
East Lansing

State
MI

Zip Code
48826

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Stabenow, Deborah, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: MI

District:

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00344473

Transaction ID : 2A6517DF89I

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stephanie Murphy For Congress

Mailing Address PO Box 205

City
Winter Park

State
FL

Zip Code
32790

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Murphy, Stephanie, N., ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: FL

District: 07

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00620443

Transaction ID : 9EA85BFF62I

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Steve Ferrara For Congress

Mailing Address PO Box 97130

City
Phoenix

State
AZ

Zip Code
85060

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Ferrara, Steve, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: AZ

District: 09

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00640268

Transaction ID : D6891F559C

Amount of Each Disbursement this Period

2000.00

Memo Item

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. The Madison PAC

Mailing Address 235 State Street #206

City Springfield State MA Zip Code 01103

Purpose of Disbursement 2018 Contribution

011

Category/Type

Candidate Name

The Madison PAC

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00426809

Transaction ID : 360B5C7A01
Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Mailing Address PO Box 10847

City Rochester State NY Zip Code 14610-0847

Purpose of Disbursement 2018 Primary

011

Category/Type

Candidate Name

Reed, Thomas, W., , II.

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NY District: 23

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00464032

Transaction ID : 3D3024CF0A
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Upton For All Of Us

Mailing Address PO Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement 2018 General

011

Category/Type

Candidate Name

Upton, Frederick, Stephen, ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MI District: 06

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2018

FEC Identification Number

C C00200584

Transaction ID : 3BD49AC9F
Amount of Each Disbursement this Period

2500.00

Memo Item

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

8500.00

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

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

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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Buchanan, Vernon, Gale, ,

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

State: FL District: 16

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00412759

Transaction ID : 2F62B7168B/

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Victory In November Election PAC (VINEPAC)

Mailing Address 700 13Th Street, NW Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Victory In November Election PAC (VINEPAC)

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00378695

Transaction ID : 170F6F49692'

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Yoder For Congress, Inc

Mailing Address PO Box 26742

City Overland Park State KS Zip Code 66225-6742

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Yoder, Kevin, Wayne, ,

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

State: KS District: 03

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2018

FEC Identification Number

C C00472365

Transaction ID : 47A9901EDF

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

11000.00

101000.00