

# 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.   
American College of Radiology Association Political Action Committee

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  03 / 01 / 2012 through  03 / 31 / 2012

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

Signature of Treasurer DR. William Herrington [Electronically Filed] Date  08 / 17 / 2012

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American College of Radiology Association Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		1032534.70
(b) Cash on Hand at Beginning of Reporting Period.....	1101766.93	
(c) Total Receipts (from Line 19) .....	145076.06	439934.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1246842.99	1472468.82
7. Total Disbursements (from Line 31).....	209843.33	435469.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1036999.66	1036999.66
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**American College of Radiology Association Political Action Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 03 / 01 / 2012 To: M M / D D / Y Y Y Y 03 / 31 / 2012

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).....	125631.90	381347.61
(ii) Unitemized .....	13439.77	52188.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	139071.67	433536.32
(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) .....	139071.67	433536.32
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.....	6000.00	6384.61
17. Other Federal Receipts (Dividends, Interest, etc.).....	4.39	13.19
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))..... ▶	145076.06	439934.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	145076.06	439934.12

**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 .....	2343.33	5010.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2343.33	5010.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	206500.00	391000.00
24. Independent Expenditures (use Schedule E) .....	0.00	25744.46
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1790.00
(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)).....	1000.00	1790.00
29. Other Disbursements .....	0.00	11924.61
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	209843.33	435469.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	209843.33	435469.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	139071.67	433536.32
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1790.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	138071.67	431746.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2343.33	5010.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2343.33	5010.09

**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 115
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Mark Adams**

Mailing Address 601 Elmwood Ave  
Univ of Rochester Med Ctr, # 648

City Rochester State NY Zip Code 14642-0001

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

Name of Employer University of Rochester Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012  
**Transaction ID : 1E5EBF12-E6B9-4178-**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. John Agola**

Mailing Address 1412 Hickman Dr

City Virginia Beach State VA Zip Code 23452-4705

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

Name of Employer Medical Center Radiologists, I Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : 69B4EE4728390368C07**

Amount of Each Receipt this Period  
249.99

Full Name (Last, First, Middle Initial)  
**C. Bibb Allen Jr.**

Mailing Address 3245 E Briarcliff Rd

City Mountain Brk State AL Zip Code 35223-1304

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

Name of Employer Montclair Baptist Medical Center Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2012  
**Transaction ID : A9AB9371F005D28A70D**

Amount of Each Receipt this Period  
625.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1874.99
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Gary E. Allen**

Mailing Address 7 Equennes Dr

City Little Rock State AR Zip Code 72223-9166

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

Name of Employer Radiology Consultants Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : 7ECA35F2F169FEB809F**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. Jerry Apple**

Mailing Address 2 Windsor Dr

City Voorhees State NJ Zip Code 08043-3721

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

Name of Employer South Jersey Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : D1191735627AF5E213C**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Raymond A. Armstrong**

Mailing Address 2006 Franklin St SE  
Radiology of Huntsville, Ste 200

City Huntsville State AL Zip Code 35801-4537

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

Name of Employer Baptist Medical Ctr-Montclair Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 12 / 2012**

**Transaction ID : A10A3EFB441AB45A61F**

Amount of Each Receipt this Period  
**100.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. John Baden</b>		Date of Receipt
Mailing Address 9 Germay Ct		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Little Rock	AR	72223-5520
FEC ID number of contributing federal political committee.		<b>Transaction ID : 235DCDFD125D7C4DD50</b>
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Radiology Consultants of Little Rock	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. James Baek</b>		Date of Receipt
Mailing Address 1701 Stonehenge Rd		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
Charleston	WV	25314-1675
FEC ID number of contributing federal political committee.		<b>Transaction ID : C69B5E32-F719-4F1E-</b>
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Kanawha Valley Radiology	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Laura Bancroft</b>		Date of Receipt
Mailing Address 375 Virginia Dr		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Winter Park	FL	32789-5701
FEC ID number of contributing federal political committee.		<b>Transaction ID : 25640F77-ECFF-418F-</b>
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Self-Employed	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Carlos Bazan III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 Tamworth Dr  
 City San Antonio State TX Zip Code 78213-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Univ. of Texas Health Science Ctr. Occupation Neuroradiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 3AA96761CB87690AECB**  
 Amount of Each Receipt this Period  
**500.00**

**B. Jacqueline Bello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 E 210th St  
 Montefiore Medical Center  
 City Bronx State NY Zip Code 10467-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Montefiore Medical Center Occupation Neuroradiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : 6750E3A2D863FA3F686**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Kenneth Berkenstock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 3555  
 City Lancaster State PA Zip Code 17604-3555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lancaster Radiology Associates Occupation Radiation Oncologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **252.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : 0F887962A9853B91748**  
 Amount of Each Receipt this Period  
**84.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1584.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Steven Berrett**  
Full Name (Last, First, Middle Initial)

Mailing Address 608 Corriente Ct

City Camarillo State CA Zip Code 93010-1607

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

Name of Employer Pueblo Radiology Medical Group Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt **03 / 23 / 2012**

**Transaction ID : D96899FF17219EAEF7D**

Amount of Each Receipt this Period **916.74**

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

Mailing Address 5201 Trent Woods Dr

City Trent Woods State NC Zip Code 28562-7441

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

Name of Employer Coastal Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **03 / 29 / 2012**

**Transaction ID : B88F0BD944F2B63EA4C**

Amount of Each Receipt this Period **80.00**

**C. Frederick Birnberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 648 Rolling Hills Rd

City Vista State CA Zip Code 92081-7502

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

Name of Employer Newport Harbor Radiology Associates Me Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 30 / 2012**

**Transaction ID : 0C687C90F3E363D25A9**

Amount of Each Receipt this Period **250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1246.74**

**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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. M. Black</b>			Date of Receipt MM / DD / YYYY 03 / 23 / 2012 <b>Transaction ID : 93A935B1845B421AC88</b>		
Mailing Address 4730 La Puma Ct			Amount of Each Receipt this Period 916.74		
City Camarillo	State CA	Zip Code 93012-4055			
FEC ID number of contributing federal political committee. C					
Name of Employer Pueblo Radiology Medical Group		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 916.74			

Full Name (Last, First, Middle Initial) <b>B. Martin Black</b>			Date of Receipt MM / DD / YYYY 03 / 13 / 2012 <b>Transaction ID : D3ABB61B8C715588079</b>		
Mailing Address 914 Woodvine Rd			Amount of Each Receipt this Period 500.00		
City Asheville	State NC	Zip Code 28803-1946			
FEC ID number of contributing federal political committee. C					
Name of Employer Pardee Hospital		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) <b>C. Garyun Blackmon</b>			Date of Receipt MM / DD / YYYY 03 / 30 / 2012 <b>Transaction ID : 3400C44C56F37AFA02D</b>		
Mailing Address 8370 Rustic Woods Way			Amount of Each Receipt this Period 300.00		
City Loomis	State CA	Zip Code 95650-8038			
FEC ID number of contributing federal political committee. C					
Name of Employer Self-Employed		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1716.74
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Gary Blum**  
Full Name (Last, First, Middle Initial)

Mailing Address 2320 Bath St  
Pueblo Radiology, Ste 208

City Santa Barbara State CA Zip Code 93105-5322

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

Name of Employer Pueblo Radiology Medical Group, Inc. Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
916.74

Date of Receipt  
03 / 23 / 2012  
Transaction ID : **6A50199BA6FEAF7F001**

Amount of Each Receipt this Period  
916.74

**B. James Bognanno**  
Full Name (Last, First, Middle Initial)

Mailing Address 1774 Hourglass Dr

City Carmel State IN Zip Code 46032-7299

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

Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 13 / 2012  
Transaction ID : **29A61ECCC54C3E93EE9**

Amount of Each Receipt this Period  
250.00

**C. John Bohannan**  
Full Name (Last, First, Middle Initial)

Mailing Address 169 La Patera Dr

City Camarillo State CA Zip Code 93010-8413

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

Name of Employer Pueblo Radiology Medical Group Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
916.74

Date of Receipt  
03 / 23 / 2012  
Transaction ID : **CF452FAD3B6CB175194**

Amount of Each Receipt this Period  
916.74

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2083.48

**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 115
	<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 College of Radiology Association Political Action Committee**

**A. George Bolton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 133 Yankton St  
 City Folsom State CA Zip Code 95630-8140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 50A7E946BCCE6725D22**  
 Amount of Each Receipt this Period  
**300.00**

**B. Charles Bowley III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 51473  
 City Casper State WY Zip Code 82605-1473  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Johns Hopkins University Occupation Radiology Resident  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : A15E8119D38932CBE35**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Jonathan Breslau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2690 Azalea Rd  
 City Sacramento State CA Zip Code 95864-4902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Associates of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **680.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : C5F2B17E1148CF55D73**  
 Amount of Each Receipt this Period  
**680.04**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1980.04</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Lynn Broderick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7710 Welton Dr  
 City Madison State WI Zip Code 53719-3026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer University of Wisconsin Medical Founda Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : 72D3E664AB6029939A0**  
 Amount of Each Receipt this Period  
**1000.00**

**B. Manuel Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2799 W Grand Blvd Henry Ford Hospital  
 City Detroit State MI Zip Code 48202-2608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Henry Ford Hospital Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2012  
**Transaction ID : 5DBD6ADA-4718-435A-**  
 Amount of Each Receipt this Period  
**2500.00**

**C. Samuel Buff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4603 Tenella Rd  
 City Trent Woods State NC Zip Code 28562-7645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Coastal Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012  
**Transaction ID : DA83EBAD7754D4828AC**  
 Amount of Each Receipt this Period  
**80.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3580.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. John Campbell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1416 Watersedge Dr  
 City Virginia Beach State VA Zip Code 23452-6222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medical Center Radiologists, Inc. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 03 / 31 / 2012  
**Transaction ID : 096EB505C9EF9908B58**  
 Amount of Each Receipt this Period  
 225.00

**B. Timothy Carmody**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14162 Willow Dr Healthcare Solutions PLC  
 City Clive State IA Zip Code 50325-8318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Iowa Methodist Medical Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 03 / 16 / 2012  
**Transaction ID : 18533EA9A20C5FC2330**  
 Amount of Each Receipt this Period  
 1000.00

**C. Michael Chaliff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6000 Lake Forrest Dr NW Ste 475  
 City Atlanta State GA Zip Code 30328-3898  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diagnostic Imaging Specialists, P.A.. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 29 / 2012  
**Transaction ID : 29D5DE62FD8414B22E2**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1475.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

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

Mailing Address 1005 Des Peres Woods Ct

City	State	Zip Code
Des Peres	MO	63131-2055

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

Name of Employer	Occupation
West County Radiological Group	Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **442.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

**Transaction ID : 353337FFCAA1C6FB8ED**

Amount of Each Receipt this Period  

367.00
--------

Full Name (Last, First, Middle Initial)  
**B. Jugesh Cheema**

Mailing Address 2466 Oak Bend PI

City	State	Zip Code
Newburgh	IN	47630-8053

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

Name of Employer	Occupation
Medical Center of Delaware	Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2012

**Transaction ID : 7184686A07D05A8CC2D**

Amount of Each Receipt this Period  

75.00
-------

Full Name (Last, First, Middle Initial)  
**C. Raja Cheruvu**

Mailing Address 165 Via Foresta Ln

City	State	Zip Code
Williamsville	NY	14221-1984

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

Name of Employer	Occupation
Windsong Radiology Group	Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **274.96**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2012

**Transaction ID : 0B175B234C106E47BB9**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>492.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Raja Cheruvu**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 165 Via Foresta Ln  
 City Williamsville State NY Zip Code 14221-1984  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Windsong Radiology Group Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 274.96

Date of Receipt 03 / 31 / 2012  
**Transaction ID : 8E51DE432C80F7BF5BF**  
 Amount of Each Receipt this Period 62.52

**B. Luke Cheung**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 Plumeria  
 City Irvine State CA Zip Code 92620-1999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newport Harbor Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2012  
**Transaction ID : CD83A4D3DA7CDE55CCC**  
 Amount of Each Receipt this Period 250.00

**C. Scott Childress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7340 Shadeland Sta Ste 200  
 City Indianapolis State IN Zip Code 46256-3980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2012  
**Transaction ID : F1697DF5E4107038184**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 562.52  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Christopher Chong**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27075 E El Macero Dr  
 City El Macero State CA Zip Code 95618-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 80FCC3F52A7510EA151**  
 Amount of Each Receipt this Period  
**250.00**

**B. Paul Chuba**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 842 Three Mile Dr  
 City Grosse Pointe Park State MI Zip Code 48230-1808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. John Hosp & Med Ctr Occupation Radiation Oncologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 23EED352C53E7BDA848**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Ramona Clark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1250 Mesa Rd  
 City Santa Barbara State CA Zip Code 93108-2454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pueblo Radiology Med Group, Inc. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **916.74**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : DC6D5806908C913718D**  
 Amount of Each Receipt this Period  
**916.74**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2166.74</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Christopher Conlin**  
Full Name (Last, First, Middle Initial)

Mailing Address 6590 Andersonville Rd

City Clarkston State MI Zip Code 48346-2794

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

Name of Employer Occupation  
DRA of Flint, PC Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 04 / 2012  
Transaction ID : 1C9E248ED9CA5CFD67F

Amount of Each Receipt this Period  
100.00

**B. W. W Conwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 293 Piney Bluff Rd

City Rembert State SC Zip Code 29128-9630

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

Name of Employer Occupation  
Pitts Radiology Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1249.98

Date of Receipt  
03 / 25 / 2012  
Transaction ID : 40F5AB8B61DAAE6B21DD

Amount of Each Receipt this Period  
416.66

**C. Frederick Cubin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Elkhorn Valley Dr

City Casper State WY Zip Code 82609-4634

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

Name of Employer Occupation  
Casper Medical Imaging Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
03 / 13 / 2012  
Transaction ID : D80724A20469EBC8953

Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1116.66

**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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Cecil Cupp III</b>		Date of Receipt 03 / 14 / 2012 <b>Transaction ID : EBCC905DC2F09847662</b>
Mailing Address 3633 Central Ave Hot Springs Radiology Services, St		Amount of Each Receipt this Period 250.00
City Hot Springs	State AR	
Zip Code 71913-6475		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Hot Springs Radiology Services, Ltd.	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Elizabeth D'Angelo</b>		Date of Receipt 03 / 29 / 2012 <b>Transaction ID : 241BDC9BE4C2035C089</b>
Mailing Address 108 Bur Ben Ln		Amount of Each Receipt this Period 80.00
City New Bern	State NC	
Zip Code 28560-7520		Aggregate Year-to-Date ▼ 240.00
FEC ID number of contributing federal political committee. C		
Name of Employer Coastal Radiology Associates	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Neal Dalrymple</b>		Date of Receipt 03 / 30 / 2012 <b>Transaction ID : DE6F31E6C65EDB6E698</b>
Mailing Address 506 Bentley Mnr		Amount of Each Receipt this Period 1000.00
City Shavano Park	State TX	
Zip Code 78249-2065		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Texas Radiological Society	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1330.00
<b>TOTAL</b> 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 115
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Huu-Ninh Dao**  
Full Name (Last, First, Middle Initial)

Mailing Address 2627 Rockwell Dr

City Davis	State CA	Zip Code 95618-7664
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : F4C71F618A0DBAC5D3E**

Amount of Each Receipt this Period  
300.00

**B. James Day Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 4430 Sweetbriar St

City Ventura	State CA	Zip Code 93003-1928
-----------------	-------------	------------------------

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

Name of Employer Pueblo Radiology Medical Group	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
916.74

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2012

**Transaction ID : 5AC79DC474DA780229B**

Amount of Each Receipt this Period  
916.74

**c. John De La Vega**  
Full Name (Last, First, Middle Initial)

Mailing Address 1422 4th St

City Sacramento	State CA	Zip Code 95814-5321
--------------------	-------------	------------------------

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

Name of Employer Radiological Assoc. of Sacramento	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.02

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : 04332FB6794F1874DE2**

Amount of Each Receipt this Period  
625.02

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1841.76
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Elvin Dennington**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 Midland St  
 City Little Rock State AR Zip Code 72205-4201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Methodist Healthcare Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : 4925C34C681A31DF206**  
 Amount of Each Receipt this Period **250.00**

**B. John Depersio**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 657 Waverly Rd  
 City La Porte State IN Zip Code 46350-2802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer La Porte Radiology Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 17 / 2012**  
**Transaction ID : 44DF848C-4E19-40FF-**  
 Amount of Each Receipt this Period **500.00**

**C. Steven Deprima**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 Rovino Ave  
 City Coral Gables State FL Zip Code 33156-4261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **03 / 27 / 2012**  
**Transaction ID : C6FA89DCB26800D18CB**  
 Amount of Each Receipt this Period **2500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3250.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael Devenny</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2012 <b>Transaction ID : 80909BF9E3371ACFD9A</b>
Mailing Address 3090 Yorktown Dr		Amount of Each Receipt this Period 1000.00
City Tuscaloosa	State AL	Zip Code 35406-2713
FEC ID number of contributing federal political committee.	C	
Name of Employer The Radiology Clinic	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Gary Dillehay</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2012 <b>Transaction ID : 4A3BB7E7BD63C8D3BBB1</b>
Mailing Address 5555 N Sheridan Rd Apt 1402		Amount of Each Receipt this Period 1000.00
City Chicago	State IL	Zip Code 60640-1636
FEC ID number of contributing federal political committee.	C	
Name of Employer Northwestern Medical Faculty Foundatio	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Christopher Dobzyniak</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2012 <b>Transaction ID : F808EE573EEA5097C2B</b>
Mailing Address 1100 Lady Ginger Ln		Amount of Each Receipt this Period 249.00
City Virginia Beach	State VA	Zip Code 23455-5657
FEC ID number of contributing federal political committee.	C	
Name of Employer Medical Center Radiologists Inc.	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2249.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. John Donnal**  
Full Name (Last, First, Middle Initial)

Mailing Address 305 Brooke Ave  
Apt 305

City Norfolk State VA Zip Code 23510-1347

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

Name of Employer Medical Center Radiologists Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
03 / 31 / 2012  
**Transaction ID : 4BEEFED8B97F0B7D908**

Amount of Each Receipt this Period  
249.99

**B. Robert Duke**  
Full Name (Last, First, Middle Initial)

Mailing Address 9300 Ingleside Farm N

City Germantown State TN Zip Code 38139-6713

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 02 / 2012  
**Transaction ID : 312AA2F61749F28734B**

Amount of Each Receipt this Period  
500.00

**C. Anne P. Dunne**  
Full Name (Last, First, Middle Initial)

Mailing Address 102 Andrews Ct

City Lewisburg State PA Zip Code 17837-6510

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

Name of Employer Geisinger Medical Center Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 633EC54935E32A4BF1B**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1749.99
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Sharon Dutton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8185 Winterhawk Ln  
 City State Zip Code  
 Granite Bay CA 95746-9018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Radiological Assoc. of Sacramento Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 984BE83E1DFD1C4E540**  
 Amount of Each Receipt this Period  
 300.00

**B. Paul Ellenbogen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6612 Cliffbrook Dr  
 City State Zip Code  
 Dallas TX 75254-8613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Southwest Imaging & Interven specialis Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 625.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2012  
**Transaction ID : 2E2C0852C0C5001320F**  
 Amount of Each Receipt this Period  
 208.34

**C. Tim H Emory**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1958 Bayard Ave  
 City State Zip Code  
 Saint Paul MN 55116-1216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 University of Minnesota Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2012  
**Transaction ID : 80A8E917-B50D-4DDA-**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	758.34
<b>TOTAL</b> 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 115
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Catherine Everett</b>		Date of Receipt
Mailing Address 812 Madam Moores Ln		M M M / D D D / Y Y Y Y Y Y 03 / 29 / 2012
City	State	Zip Code
New Bern	NC	28562-6446
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 7F5B9375BF17BFFE340</b>
Name of Employer Coastal Radiology Associates		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	240.00	

Full Name (Last, First, Middle Initial) <b>B. Timothy Farrell</b>		Date of Receipt
Mailing Address 128 Killarney		M M M / D D D / Y Y Y Y Y Y 03 / 15 / 2012
City	State	Zip Code
Williamsburg	VA	23188-8415
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : B00222C80A9FF71A8D2</b>
Name of Employer Peninsula Radiology		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) <b>C. Casey Fatz</b>		Date of Receipt
Mailing Address 3962 S Brentwood Ln		M M M / D D D / Y Y Y Y Y Y 03 / 09 / 2012
City	State	Zip Code
Coeur D Alene	ID	83814-7054
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 287FC981068051441AF</b>
Name of Employer Radiology Associates of North Idaho, I		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1330.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Amanda Ferrell**  
Full Name (Last, First, Middle Initial)

Mailing Address 1606 Blair St

City Little Rock State AR Zip Code 72207-5302

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2012

Transaction ID : **EEBA9CEABADFB899A96**

Amount of Each Receipt this Period 250.00

**B. Michael Flaherty**  
Full Name (Last, First, Middle Initial)

Mailing Address 419 S Washington St  
Casper Medical Imaging, Ste 101

City Casper State WY Zip Code 82601-2951

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

Name of Employer Camelot Radiology Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 13 / 2012

Transaction ID : **E40B2D28B1B6E474614**

Amount of Each Receipt this Period 500.00

**C. Howard Fleishon**  
Full Name (Last, First, Middle Initial)

Mailing Address 3690 E Camino Sin Nombre

City Paradise Valley State AZ Zip Code 85253-5011

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

Name of Employer Valley Radiologists LTD Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 16 / 2012

Transaction ID : **7D358636-07D0-45DE-**

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Christopher Flye**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 Cambridge Ct  
 City Trent Woods State NC Zip Code 28562-4500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Coastal Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt **03 / 29 / 2012**  
**Transaction ID : 76B73359ABE83D37B76**  
 Amount of Each Receipt this Period **80.00**

**B. Cassandra Foens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 E Ridgeway Ave  
 Covenant Cancer Treatment Ctr  
 City Waterloo State IA Zip Code 50702-5060  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Clinical Radiologists PC Occupation Radiation Oncologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **03 / 07 / 2012**  
**Transaction ID : D3CE5438-4923-45CE-**  
 Amount of Each Receipt this Period **2500.00**

**C. Kevin Forte**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 Piney Ln  
 City Little Rock State AR Zip Code 72223-9128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : A7317F95ED7EAEB8FF2**  
 Amount of Each Receipt this Period **250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2830.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Scott Foster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3807 Del Valle Pl  
 City Davis State CA Zip Code 95618-6735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 30 / 2012**  
**Transaction ID : 44E41BC253E9270C083**  
 Amount of Each Receipt this Period **300.00**

**B. Parham Fox**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 Nationwide Dr Radiology Consultants  
 City Lynchburg State VA Zip Code 24502-4272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Lynchburg Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt **03 / 20 / 2012**  
**Transaction ID : C6FC312C8219711BADE**  
 Amount of Each Receipt this Period **365.00**

**C. Benjamin Franc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 438 Portofino Dr Apt 103  
 City San Carlos State CA Zip Code 94070-3574  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer University of California Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 30 / 2012**  
**Transaction ID : ED98A8A83807EECAE07**  
 Amount of Each Receipt this Period **300.00**

**SUBTOTAL** of Receipts This Page (optional)..... **965.00**  
**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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Sean Mauric Freyne</b>		Date of Receipt
Mailing Address 369 Paseo De Playa Apt 303		M M M / D D D / Y Y Y Y Y Y 03 / 23 / 2012
City	State	Zip Code
Ventura	CA	93001-2750
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 503E16D19204178ED95</b>
Name of Employer Pueblo Radiology Medical Group		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		916.74
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	916.74	

Full Name (Last, First, Middle Initial) <b>B. Clinton Fuller III</b>		Date of Receipt
Mailing Address 9601 Lile Dr Ste 1100		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2012
City	State	Zip Code
Little Rock	AR	72205-6333
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : B66B1E8982ECBCC874E</b>
Name of Employer Radiology Consultants of Little Rock		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		250.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>C. Tong Ge</b>		Date of Receipt
Mailing Address 36 Cabot Dr		M M M / D D D / Y Y Y Y Y Y 03 / 01 / 2012
City	State	Zip Code
Chesterbrook	PA	19087-5619
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 97D39940-E0C3-4647-</b>
Name of Employer Univ of Texas Medical School		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		500.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1666.74
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Roger Gilbert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 Expo Pkwy  
 City Sacramento State CA Zip Code 95815-4227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Radiation Oncologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 30 / 2012**  
**Transaction ID : 07F887794C4F8DA556A**  
 Amount of Each Receipt this Period **300.00**

**B. Peter Giuliano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 Amargosa  
 City Irvine State CA Zip Code 92602-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newport Harbor Radiology Associates Me Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 20 / 2012**  
**Transaction ID : BC3D1129C2A2FEA0123**  
 Amount of Each Receipt this Period **250.00**

**C. Ross Golding**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 590 Eureka Ave  
 City Reno State NV Zip Code 89512-3425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Reno Diagnostic Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 13 / 2012**  
**Transaction ID : 76BB0DF8611BFEE6DC7**  
 Amount of Each Receipt this Period **1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1550.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Whitney Goodwin</b>		Date of Receipt
Mailing Address 22 Tallyho Ln		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2012
City	State	Zip Code
Little Rock	AR	72227-2416
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Radiology Associates	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	
		Amount of Each Receipt this Period
		250.00
Transaction ID : <b>B6A1E5439CE15379B53</b>		

Full Name (Last, First, Middle Initial) <b>B. Lauren Granata</b>		Date of Receipt
Mailing Address 1317 Five Point Rd		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2012
City	State	Zip Code
Virginia Beach	VA	23454-1930
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Medical Center Radiologists	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	252.00	
		Amount of Each Receipt this Period
		252.00
Transaction ID : <b>72C9E1DA3BCB6F848CD</b>		

Full Name (Last, First, Middle Initial) <b>C. Robert Green Jr.</b>		Date of Receipt
Mailing Address 4900 Mountain Laurel Dr		M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012
City	State	Zip Code
Lynchburg	VA	24503-1971
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Radiology Consultants of Lynchburg	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	350.00	
		Amount of Each Receipt this Period
		350.00
Transaction ID : <b>6F10525F87938AEC432</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	852.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Hani Greiss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5958 Granite Hills Dr N  
 City Granite Bay State CA Zip Code 95746-6764  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : B1D0B66E52BF94E652A**  
 Amount of Each Receipt this Period  
**300.00**

**B. James Hall Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 Overlink Ct  
 City Lynchburg State VA Zip Code 24503-3255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Lynchburg Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : ED9164F3A489699D7C3**  
 Amount of Each Receipt this Period  
**350.00**

**C. Christopher Hancock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1133 N Palm Canyon Dr  
 Desert Medical Imaging, Ste B  
 City Palm Springs State CA Zip Code 92262-4431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mount Sinai Medical Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : BC521A65-5191-4308-**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1650.00</b>
<b>TOTAL</b> 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 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Bryan Hankins**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9654 Pleasant View Ln  
City Zionsville State IN Zip Code 46077-9817  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2012  
**Transaction ID : 6A1B8694B760EEAC263**  
Amount of Each Receipt this Period  
250.00

**B. Laurel Hansch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5522 Berkeley Rd  
City Santa Barbara State CA Zip Code 93111-1616  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pueblo Medical Radiology Group, Inc. Occupation Diagnostic Radiologist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 916.74

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2012  
**Transaction ID : 8EBE68A7813DFDA1021**  
Amount of Each Receipt this Period  
916.74

**C. Todd Harris**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5880 Sunset Ln  
City Indianapolis State IN Zip Code 46228-1450  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2012  
**Transaction ID : 162ACB624E709092ACB**  
Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1416.74  
**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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Lawrence Harter**

Mailing Address 5235 Paseo Cameo

City Santa Barbara State CA Zip Code 93111-1133

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

Name of Employer Pueblo Radiology Medical Group Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 23 / 2012**

**Transaction ID : 8201828750A61A4D8DA**

Amount of Each Receipt this Period  
**916.74**

Full Name (Last, First, Middle Initial)  
**B. Scott Harter**

Mailing Address 55 Maisons Dr

City Little Rock State AR Zip Code 72223-9020

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : 068FC7D205AA226C860**

Amount of Each Receipt this Period  
**625.00**

Full Name (Last, First, Middle Initial)  
**C. Patrick Harty**

Mailing Address 5249 Wyndham Oak Ln

City Carmichael State CA Zip Code 95608-3472

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

Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : B6BE71FCCD90C3630C8**

Amount of Each Receipt this Period  
**300.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1841.74</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. David Hays</b>		Date of Receipt 03 / 31 / 2012 <b>Transaction ID : 37B9D52BBDD9EF91481</b>
Mailing Address 18 Farnham Loop		Amount of Each Receipt this Period 250.00
City Little Rock	State AR	Zip Code 72223-9199
FEC ID number of contributing federal political committee. C		
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Ivan Hayward</b>		Date of Receipt 03 / 23 / 2012 <b>Transaction ID : 30C0DF125410C16198A</b>
Mailing Address 1292 Church St		Amount of Each Receipt this Period 916.74
City Ventura	State CA	Zip Code 93001-2125
FEC ID number of contributing federal political committee. C		
Name of Employer Pueblo Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	

Full Name (Last, First, Middle Initial) <b>C. Gerard Helinek</b>		Date of Receipt 03 / 10 / 2012 <b>Transaction ID : 3C91E5E6-7B91-457E-</b>
Mailing Address 25 Hummingbird Rd		Amount of Each Receipt this Period 250.00
City Wyomissing	State PA	Zip Code 19610-2849
FEC ID number of contributing federal political committee. C		
Name of Employer West Reading Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1416.74
<b>TOTAL</b> 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 37 OF 115
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Timothy Hellewell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1515 Parkland Dr  
 City Lynchburg State VA Zip Code 24503-2414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Lynchburg Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt **03 / 30 / 2012**  
**Transaction ID : 3B60568271CF9012D38**  
 Amount of Each Receipt this Period **350.00**

**B. William Henry Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 Rahling Rd Apt 518  
 City Little Rock State AR Zip Code 72223-4653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : 35381F1B8A7D0B1D295**  
 Amount of Each Receipt this Period **250.00**

**C. William Henry Sr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Cherry Creek Cv  
 City Little Rock State AR Zip Code 72212-2005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants - Little Rock, A Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : B40777BD60FC166C28E**  
 Amount of Each Receipt this Period **250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Rayda Hernandez-Guasch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 89 Ave De Diego  
 Mail Boxes Etc, Ste 105  
 City San Juan State PR Zip Code 00927-6370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer University of Puerto Rico Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2012  
**Transaction ID : A3308521AF7E304EA7D**  
 Amount of Each Receipt this Period  
**100.00**

**B. Christopher Herzig**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 Country Club Dr  
 City Ojai State CA Zip Code 93023-3720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pueblo Radiology Medical Group, Inc. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **916.74**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : 9A5592B8A32AB642DE5**  
 Amount of Each Receipt this Period  
**916.74**

**C. Keith Hewel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 E Front Ave  
 Ste 1402  
 City Coeur D Alene State ID Zip Code 83814-5231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012  
**Transaction ID : C5F1D42ABA96D3EE426**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1616.74</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Kevin O. Hicks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4709 John Scott Dr  
 City Lynchburg State VA Zip Code 24503-1003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Lynchburg Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012  
**Transaction ID : 8B6993593A2C12BA803**  
 Amount of Each Receipt this Period  
**350.00**

**B. Kenneth Hite**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 434 New Britain Dr  
 City Lynchburg State VA Zip Code 24503-2143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Lynchburg Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012  
**Transaction ID : 56E5C96E-1A73-4028-**  
 Amount of Each Receipt this Period  
**365.00**

**C. Glenn Hofer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7335 Sierra Dr  
 City Granite Bay State CA Zip Code 95746-9584  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rad Assoc of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 105BCA1ED361114704A**  
 Amount of Each Receipt this Period  
**300.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1015.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Christopher Hoffman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1117 Teneighth Way

City Sacramento State CA Zip Code 95818-4024

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

Name of Employer Self-Employed Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : D64A0F5599C90C3A2DF**

Amount of Each Receipt this Period 252.00

**B. Susan Ivancevich**  
Full Name (Last, First, Middle Initial)

Mailing Address 89 2nd Ave SW

City Carmel State IN Zip Code 46032-2002

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

Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2012  
**Transaction ID : 67E415164CBA620AB6E**

Amount of Each Receipt this Period 250.00

**C. Lester Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1021 Downshire Chase

City Virginia Beach State VA Zip Code 23452-6154

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

Name of Employer Medical Center Radiologists, Inc. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 249.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : E0D4E74125792F7CE31**

Amount of Each Receipt this Period 249.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 751.00

**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 115
	<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 College of Radiology Association Political Action Committee**

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

Mailing Address 8926 Waterside Cir

City Indianapolis State IN Zip Code 46278-1158

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

Name of Employer Radiation Oncology Division Occupation Radiation Oncologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 12 / 2012  
**Transaction ID : 419EAF2EBA526AA1D8E8**

Amount of Each Receipt this Period 200.00

**B. Christopher Jones**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 Ardea Pl

City Sacramento State CA Zip Code 95835-2009

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

Name of Employer Radiological Assoc. of Sacramento Occupation Radiation Oncologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 5791746A535387D5ED8**

Amount of Each Receipt this Period 240.00

**C. Michael King**  
Full Name (Last, First, Middle Initial)

Mailing Address 9601 Lile Dr Ste 1100

City Little Rock State AR Zip Code 72205-6333

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : 4C6124329D9B48AD6F4**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 690.00

**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 115
	<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 College of Radiology Association Political Action Committee**

**A. Amy Kirby**  
Full Name (Last, First, Middle Initial)

Mailing Address 14708 Hollyhock Dr

City Oklahoma City State OK Zip Code 73142-1804

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

Name of Employer Eagle Eye Imaging Occupation Radiology Resident

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : B2FDF195D892F9A8CE9**

Amount of Each Receipt this Period  
**200.00**

**B. David Kolb**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 Talais Dr

City Little Rock State AR Zip Code 72223-9129

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : D068A17274E5618195C**

Amount of Each Receipt this Period  
**250.00**

**C. Kenyon K. Kopecky**  
Full Name (Last, First, Middle Initial)

Mailing Address 650 Sugarbush Dr

City Zionsville State IN Zip Code 46077-1907

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

Name of Employer Irvington Radiologists, PC Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2012**

**Transaction ID : A3680C91C44D328B451**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **700.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Jeffrey Kramer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2147 Meadow Ridge Dr  
 City Lancaster State PA Zip Code 17601-5762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2012**  
**Transaction ID : 8681ABE631217EE35B8**  
 Amount of Each Receipt this Period  
**100.00**

**B. Jeffrey Kuo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2619 Mariella Dr  
 City Rocklin State CA Zip Code 95765-5618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**  
**Transaction ID : D0A2BE2FDAFAC181EA2**  
 Amount of Each Receipt this Period  
**300.00**

**C. David Kurlander**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12511 Glendurgan Dr  
 City Carmel State IN Zip Code 46032-8314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2012**  
**Transaction ID : C096A69E1CE3A0E2922**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>650.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Catherine Kurowski**  
Full Name (Last, First, Middle Initial)

Mailing Address 528 E 56th St

City Indianapolis State IN Zip Code 46220-3067

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

Name of Employer Self-Employed Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2012  
**Transaction ID : 8F5F4BBD64659B1E00F**

Amount of Each Receipt this Period 250.00

**B. David Kushner**  
Full Name (Last, First, Middle Initial)

Mailing Address 2020 Canal Rd

City Virginia Beach State VA Zip Code 23451-1615

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

Name of Employer Medical Center Radiologists Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 249.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : CE452A4018AD1B214B7**

Amount of Each Receipt this Period 249.00

**C. Paul Lampert**  
Full Name (Last, First, Middle Initial)

Mailing Address 11595 E 26th St

City Yuma State AZ Zip Code 85367-2203

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

Name of Employer MDIG Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 12 / 2012  
**Transaction ID : 97D6986154257CEFC3E**

Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 624.00

**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 115
	<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 College of Radiology Association Political Action Committee**

**A. Karah Lanier**  
Full Name (Last, First, Middle Initial)

Mailing Address 1503 S Sea Breeze Trl

City	State	Zip Code
Virginia Beach	VA	23452-4730

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

Name of Employer	Occupation
Medical Center Radiologists	Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : EA2DB97C2A13644257A**

Amount of Each Receipt this Period  
 240.00

**B. Susan Lee**  
Full Name (Last, First, Middle Initial)

Mailing Address 1500 Expo Pkwy

City	State	Zip Code
Sacramento	CA	95815-4227

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

Name of Employer	Occupation
Radiological Assoc. of Sacramento	Radiation Oncologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 953DA9C3A3B322742F2**

Amount of Each Receipt this Period  
 600.00

**C. Mark Lequire**  
Full Name (Last, First, Middle Initial)

Mailing Address 2055 Myrtlewood Dr

City	State	Zip Code
Montgomery	AL	36111-1003

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

Name of Employer	Occupation
Montgomery Radiology Associates	Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012  
**Transaction ID : 3363F277E83F33D1ADE**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1090.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Paul Leslie</b>		Date of Receipt
Mailing Address 260 Eshelman Rd		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2012
City Lancaster	State PA	Zip Code 17601-5645
FEC ID number of contributing federal political committee. C		<b>Transaction ID : DC9E4343A3AA4D1FC78</b>
Name of Employer Lancaster Radiology Associates		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		300.00

Full Name (Last, First, Middle Initial) <b>B. Winifred Leung</b>		Date of Receipt
Mailing Address 1155 Oriole Rd		M M M / D D D / Y Y Y Y Y Y 03 / 23 / 2012
City Santa Barbara	State CA	Zip Code 93108-2438
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 77EFA67897A8D235E87</b>
Name of Employer Self-Employed		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		916.74
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		916.74

Full Name (Last, First, Middle Initial) <b>C. Jay Lichman</b>		Date of Receipt
Mailing Address 610 Kings Rd		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2012
City Newport Beach	State CA	Zip Code 92663-5712
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 312DCAB2B14F7A1BD30</b>
Name of Employer Newport Harbor Radiology Associates		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1266.74
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Edward Lin**  
Full Name (Last, First, Middle Initial)

Mailing Address 32651 Rachel Cir

City Dana Point State CA Zip Code 92629-1066

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

Name of Employer Pueblo Radiology Medical Group Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
03 / 23 / 2012  
Transaction ID : 6A88E7842D87B09CBA6

Amount of Each Receipt this Period  
250.02

**B. David Linstadt**  
Full Name (Last, First, Middle Initial)

Mailing Address 9645 Clos Du Lac Cir

City Loomis State CA Zip Code 95650-7717

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

Name of Employer Radiation Oncology Centers Occupation Radiation Oncologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 30 / 2012  
Transaction ID : 66F27D4F2EA68850DEC

Amount of Each Receipt this Period  
300.00

**c. Mark Logsdon**  
Full Name (Last, First, Middle Initial)

Mailing Address 1500 Expo Pkwy  
Rad Associates of Sacramento

City Sacramento State CA Zip Code 95815-4227

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

Name of Employer Radiological Assoc. of Sacramento Occupation Radiation Oncologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 30 / 2012  
Transaction ID : 2F80FDAED52A8CE206C

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.02

**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 115
	<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 College of Radiology Association Political Action Committee**

**A. John Lohnes Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 8903  
 Wichita Radiological Group Pa  
 City State Zip Code  
 Wichita KS 67208-0903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Wichita Radiological Group PA Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 7A99D7E7595DA6BE0B2**  
 Amount of Each Receipt this Period  
 250.00

**B. Don Charles Loomer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1747 E Wallington Ln  
 City State Zip Code  
 Fresno CA 93730-3596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Radiological Assoc. of Sacramento Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : A488D9360DF0130C07F**  
 Amount of Each Receipt this Period  
 300.00

**C. James Lorentzen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 Cove Hbr  
 City State Zip Code  
 New Bern NC 28562-7300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Coastal Radiology Associates Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 29 / 2012  
**Transaction ID : EA956F5C2CF3CD7338C**  
 Amount of Each Receipt this Period  
 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	630.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Kay Lozano**  
Full Name (Last, First, Middle Initial)

Mailing Address 8100 E Union Ave  
Unit 2104

City Denver State CO Zip Code 80237-2979

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

Name of Employer Radiology Imaging Association Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 629.00

Date of Receipt 03 / 09 / 2012  
**Transaction ID : 43EAACFBAD22C62FE4A8**

Amount of Each Receipt this Period 209.00

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

Mailing Address 8100 E Union Ave  
Unit 2104

City Denver State CO Zip Code 80237-2979

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

Name of Employer Radiology Imaging Association Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 629.00

Date of Receipt 03 / 21 / 2012  
**Transaction ID : 99304DE4-900A-4E81-**

Amount of Each Receipt this Period 420.00

**C. Joseph Luna**  
Full Name (Last, First, Middle Initial)

Mailing Address 4060 1st Ave

City San Diego State CA Zip Code 92103-2045

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

Name of Employer X-Ray Medical Group, Inc. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 666.72

Date of Receipt 03 / 23 / 2012  
**Transaction ID : 7F30EF3C81437D671A0**

Amount of Each Receipt this Period 666.72

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1295.72

**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 115
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Lee Allen Madeline**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1210 W Faris Rd  
 City Greenville State SC Zip Code 29605-4444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Greenville Radiology Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2012  
**Transaction ID : 422A96E9-942A-44EC-**  
 Amount of Each Receipt this Period  
 250.00

**B. Vartan Malian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Crane Meadow Ct  
 City Roseville State CA Zip Code 95661-4030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 372B091164C3FE0C420**  
 Amount of Each Receipt this Period  
 300.00

**C. Alfred Mansour Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3704 North Blvd  
 Central La Imaging Inc, Ste A  
 City Alexandria State LA Zip Code 71301-3658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Central LA Imaging Inc. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2012  
**Transaction ID : A7F3AF233F899763BAD**  
 Amount of Each Receipt this Period  
 83.34

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	633.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. David Marinelli**  
Full Name (Last, First, Middle Initial)

Mailing Address 9 Overbrook Ln

City Longmeadow State MA Zip Code 01106-2509

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

Name of Employer Jefferson Radiology Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : 05A04F3CC67ACA1480E**

Amount of Each Receipt this Period  
500.00

**B. Mylon Marshall**  
Full Name (Last, First, Middle Initial)

Mailing Address 2201 Lassen Pl

City Davis State CA Zip Code 95616-6604

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

Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : ED503A5247A810F8E02**

Amount of Each Receipt this Period  
300.00

**C. Melissa C. Martin**  
Full Name (Last, First, Middle Initial)

Mailing Address 507 Susana Ave

City Redondo Beach State CA Zip Code 90277-3953

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

Name of Employer Therapy Physics, Inc. Occupation Physicist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2012

**Transaction ID : 9C2CAE6B29F94F1D723**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1800.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Ronald J. Martin**

Mailing Address 110 Buckland Pl

City Little Rock State AR Zip Code 72223-4567

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2012

Transaction ID : **780D8C26DBC0C5ECFF1**

Amount of Each Receipt this Period 250.00

Full Name (Last, First, Middle Initial)  
**B. Terry Martin**

Mailing Address 2090 Columbiana Rd  
Rad Assoc of Birmingham PC

City Vestavia State AL Zip Code 35216-2153

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

Name of Employer Rad Assoc of Birmingham PC Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2012

Transaction ID : **9B8CCA48C9632A46B3D**

Amount of Each Receipt this Period 100.00

Full Name (Last, First, Middle Initial)  
**C. Alberto Martinez**

Mailing Address 1884 Bellerive Ln  
Unit 213

City Coeur D Alene State ID Zip Code 83814-5308

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

Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2012

Transaction ID : **9EF2EA7AFDC711254C1**

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

**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 115
	<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 College of Radiology Association Political Action Committee**

**A. Vickie Massey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 W 51st St  
 City Kansas City State MO Zip Code 64112-2372  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kansas City Cancer Centers Occupation Radiation Oncologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 6191CFDF0FD48471034**  
 Amount of Each Receipt this Period  
**1000.00**

**B. Raymond Mastrovito**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1326  
 Pueblo Radiology Medical Group  
 City Santa Barbara State CA Zip Code 93102-1326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pueblo Radiology Medical Group Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **916.74**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : 8395FBFA238E6CB3C72**  
 Amount of Each Receipt this Period  
**916.74**

**C. Alan Matsumoto**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 800170  
 Univ of Virginia Health System  
 City Charlottesville State VA Zip Code 22908-0170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UVA Health System Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : D3D3734DC117A28AF67**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2916.74</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Dale McCarter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7150 N Pennsylvania St  
 City Indianapolis State IN Zip Code 46240-3036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irvington Radiologist Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : DDE02BA7B952BF80FE**  
 Amount of Each Receipt this Period  
**250.00**

**B. Charles McDonnell III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5436 Ridge Park Dr  
 City Loomis State CA Zip Code 95650-7701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 546459DBE3A3403AD8C**  
 Amount of Each Receipt this Period  
**300.00**

**C. Joseph McGinley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5910 S Cedar St  
 City Casper State WY Zip Code 82601-6244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Casper Medical Imaging Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : 020A48E7FEE7E082416**  
 Amount of Each Receipt this Period  
**500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1050.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Geraldine McGinty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 Avenue B  
 Apt 3C  
 City New York State NY Zip Code 10009-5029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Montefiore Imaging Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2012**  
**Transaction ID : 400C9020880CEAD6F675**  
 Amount of Each Receipt this Period  
**100.00**

**B. Keith McKlending**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1712 W Polo Green Ave  
 City Post Falls State ID Zip Code 83854-9863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2012**  
**Transaction ID : 4538625D38FF0FC9F3B**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Brian McNamee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3700 N Miners Loop  
 City Coeur D Alene State ID Zip Code 83815-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 09 / 2012**  
**Transaction ID : 1E247689874ABE90E81**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

**A. Richard McWhorter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5221 US Route 60  
 City Huntington State WV Zip Code 25705-2022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Inc. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 16 / 2012**  
**Transaction ID : 768457D7E0A32FA110A**  
 Amount of Each Receipt this Period **500.00**

**B. Arne Michalson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 W Ironwood Dr Ste 110  
 City Coeur D Alene State ID Zip Code 83814-2666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 09 / 2012**  
**Transaction ID : A984A3D613CDEB25A67**  
 Amount of Each Receipt this Period **1000.00**

**C. Linda Michalson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 W Ironwood Dr Kootenai Outpatient Imaging, Ste 1  
 City Coeur D Alene State ID Zip Code 83814-2666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 09 / 2012**  
**Transaction ID : 2D4D7E8AC2E8D6C8F9C**  
 Amount of Each Receipt this Period **1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> 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 57 OF 115
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Romney Miller**  
Full Name (Last, First, Middle Initial)  
Mailing Address 610 Richland Ave  
City Lafayette State LA Zip Code 70508-6617  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Oklahoma Univ. Health Services Ctr. Occupation Radiology Resident  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 03 / 11 / 2012  
**Transaction ID : 6B104858-5CB6-4D31-**  
Amount of Each Receipt this Period 500.00

**B. Steven Miller**  
Full Name (Last, First, Middle Initial)  
Mailing Address 23 Moffat Rd  
City Waban State MA Zip Code 02468-1112  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Newton Wellesley Hosp Occupation Diagnostic Radiologist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 03 / 08 / 2012  
**Transaction ID : 4B829FC65967CCDA8E01**  
Amount of Each Receipt this Period 250.00

**C. Todd Mitchell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12982 Dellinger Dr  
City Fishers State IN Zip Code 46038-9036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Indiana University School of Medicine Occupation Radiology Resident  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 03 / 13 / 2012  
**Transaction ID : 0C5B08964EBBB8E083C**  
Amount of Each Receipt this Period 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Debra Monticciolo**  
Full Name (Last, First, Middle Initial)

Mailing Address 2401 S 31st St  
Scott and White Clinic

City Temple State TX Zip Code 76508-0001

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

Name of Employer Scott and White Clinic Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
03 / 13 / 2012  
Transaction ID : C099433A4E886B23379

Amount of Each Receipt this Period  
2500.00

**B. David Moody**  
Full Name (Last, First, Middle Initial)

Mailing Address 2133 S Whitetail Crossing Ct

City Coeur D Alene State ID Zip Code 83814-5019

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

Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 09 / 2012  
Transaction ID : F0D55A0AC0906ED15B9

Amount of Each Receipt this Period  
1000.00

**C. Demetrius Morros**  
Full Name (Last, First, Middle Initial)

Mailing Address 7418 Ridgcrest Court Rd

City Vestavia State AL Zip Code 35242-0525

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

Name of Employer Birmingham Radiological Group P.C. Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.02

Date of Receipt  
03 / 11 / 2012  
Transaction ID : A7E20C5C8D1E86C9A0E

Amount of Each Receipt this Period  
83.34

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3583.34

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Joseph Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 Hickory Hills Cir  
 City Little Rock State AR Zip Code 72212-2766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : D13D368314E316BCC4F**  
 Amount of Each Receipt this Period **250.00**

**B. Dennis Myers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4412 W Easy St  
 City New Palestine State IN Zip Code 46163-8638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Medical College of Ohio Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 13 / 2012**  
**Transaction ID : 7A7A3D0462CBBB8A34C**  
 Amount of Each Receipt this Period **250.00**

**C. Richard Newton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 Nationwide Dr  
 Radiology Consultants  
 City Lynchburg State VA Zip Code 24502-4272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Lynchburg Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 14 / 2012**  
**Transaction ID : 3D163DFE-B5B3-47D7-**  
 Amount of Each Receipt this Period **500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Binh Nguyen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15521 Orchid Ave  
 City Tustin State CA Zip Code 92782-1933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Univ of South Alabama Med Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt  
 03 / 20 / 2012  
**Transaction ID : D0F43256DC28FE810E9**  
 Amount of Each Receipt this Period  
 250.00

**B. Steven Nokes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Carmel Ln  
 City Little Rock State AR Zip Code 72212-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt  
 03 / 31 / 2012  
**Transaction ID : CEBF5203B953616F29C**  
 Amount of Each Receipt this Period  
 250.00

**C. Michael Norton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1441 Kingsford Dr  
 City Carmichael State CA Zip Code 95608-6162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rad Assoc of Sacramento Med Gr Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt  
 03 / 30 / 2012  
**Transaction ID : AB511ADC814E84E1652**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Daniel O'Shea**

Mailing Address 301 S 7th Ave  
W Reading Radiology Assoc, Ste 135

City Reading State PA Zip Code 19611-1442

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

Name of Employer West Reading Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 31 / 2012  
**Transaction ID : 44795F44-E506-4FEE-**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2515 Vista Dr

City Newport Beach State CA Zip Code 92663-5631

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

Name of Employer Newport Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 20 / 2012  
**Transaction ID : 9C7977ACE4D70CB8FEF**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**c. Randon Opp**

Mailing Address 700 W Ironwood Dr  
Radiology Associates N Idaho, Ste

City Coeur D Alene State ID Zip Code 83814-2666

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

Name of Employer Radiology Associates of North Idaho, I Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 09 / 2012  
**Transaction ID : 7C247E853CCB8ED4646**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Michael Orsi</b>		Date of Receipt 03 / 30 / 2012 <b>Transaction ID : 46CDF979DC9F1290D0F</b>
Mailing Address 6635 Biscay Bay		Amount of Each Receipt this Period 250.00
City San Antonio	State TX	Zip Code 78249-2572
FEC ID number of contributing federal political committee. C		
Name of Employer University of Texas Health Science Cen	Occupation Radiology Resident	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B. Andrew Osburn</b>		Date of Receipt 03 / 23 / 2012 <b>Transaction ID : FD6A751767939CA1920</b>
Mailing Address 238 E Calle Laureles		Amount of Each Receipt this Period 916.74
City Santa Barbara	State CA	Zip Code 93105-2712
FEC ID number of contributing federal political committee. C		
Name of Employer Pueblo Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 916.74	

Full Name (Last, First, Middle Initial) <b>C. Salil Parikh</b>		Date of Receipt 03 / 08 / 2012 <b>Transaction ID : 434D9995F12754C5EAB0</b>
Mailing Address 9477 Johnson Road Ext		Amount of Each Receipt this Period 250.00
City Germantown	State TN	Zip Code 38139-3603
FEC ID number of contributing federal political committee. C		
Name of Employer Radiology Assoc of Ocala	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1416.74
<b>TOTAL</b> 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 115
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Sandip Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 141 Beaumont Ct

City Wilmington State NC Zip Code 28412-8267

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

Name of Employer Delaney Radiologists, P.A. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 7FE7C104DDF7BC013AF**

Amount of Each Receipt this Period 500.00

**B. John Patti**  
Full Name (Last, First, Middle Initial)

Mailing Address 11 Willard Ln

City Lynnfield State MA Zip Code 01940-1735

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

Name of Employer John A. Patti, M.D., Inc. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 14 / 2012  
**Transaction ID : 91765F4FB6F98D3E176**

Amount of Each Receipt this Period 2500.00

**C. Mahrad Paymani**  
Full Name (Last, First, Middle Initial)

Mailing Address 7635 Frog Log Ln

City Leesburg State FL Zip Code 34748-9170

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

Name of Employer Lake Medical Imaging Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2012  
**Transaction ID : ADA3FAA9-5033-4458-**

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00

**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 115
	<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 College of Radiology Association Political Action Committee**

**A. Wallace Peck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 Mahogany Dr  
 City Irvine State CA Zip Code 92620-1232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newport Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012  
**Transaction ID : 3CB4D519A71FC7E5177**  
 Amount of Each Receipt this Period  
**250.00**

**B. W. Dale Perrymore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 Courts Dr  
 City Little Rock State AR Zip Code 72223-9021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : 2ABCABB330209CF3495**  
 Amount of Each Receipt this Period  
**250.00**

**C. Mary Peterson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15401 Sweetwater Ct  
 City Fort Myers State FL Zip Code 33912-2353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Regional Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : D4EEDF8A31D369D1DE1**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1500.00</b>
<b>TOTAL</b> 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 115
	<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 College of Radiology Association Political Action Committee**

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

Mailing Address 3 Windsor Ct

City Little Rock State AR Zip Code 72212-3214

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 31 / 2012  
**Transaction ID : 3BA46A92F58A645FB66**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. John Plemmons**

Mailing Address 2960 Chilton Pl

City Virginia Beach State VA Zip Code 23456-7932

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

Name of Employer Medical Center Radiologists Inc Occupation Diagnostic Radiologists

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
03 / 31 / 2012  
**Transaction ID : E397440A242A0B556A3**

Amount of Each Receipt this Period  
252.00

Full Name (Last, First, Middle Initial)  
**C. Curtis Poor**

Mailing Address 2415 Eagle Cir

City Bettendorf State IA Zip Code 52722-6202

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

Name of Employer Radiology Group PC SC Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 23 / 2012  
**Transaction ID : 305137C56C60EDCEA37**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 752.00

**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 66 OF 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Thomas Poulton</b>		Date of Receipt MM / DD / YYYY 03 / 13 / 2012 <b>Transaction ID : 6146EC2859CCE9941C2</b>
Mailing Address 2600 6th St SW Aultman Hospital		Amount of Each Receipt this Period 250.00
City Canton	State OH	
Zip Code 44710-1702		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Aultman Hospital	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. James Rawson</b>		Date of Receipt MM / DD / YYYY 03 / 22 / 2012 <b>Transaction ID : E109C4B6D91B9DE5D09</b>
Mailing Address 1120 15th St Medical College of Georgia, # BA14		Amount of Each Receipt this Period 83.34
City Augusta	State GA	
Zip Code 30912-0004		Aggregate Year-to-Date ▼ 250.02
FEC ID number of contributing federal political committee. C		
Name of Employer Medical College of Georgia	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. William Ray</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2012 <b>Transaction ID : 9D79D179569E13F9747</b>
Mailing Address 1907 Redbud Ln		Amount of Each Receipt this Period 100.00
City Bloomington	State IL	
Zip Code 61704-2773		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer Bloomington Radiology SC	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	433.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Michael Reburn**

Mailing Address 2708 Legacy Ct

City Bartlesville State OK Zip Code 74006-7449

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

Name of Employer RSI Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
03 / 18 / 2012  
**Transaction ID : DD33B2AB-A112-4C08-**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Richard Rhee**

Mailing Address 7 Agostino

City Newport Coast State CA Zip Code 92657-1220

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

Name of Employer Newport Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 20 / 2012  
**Transaction ID : 8C9C9696677E139817E**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Bruce Richmond**

Mailing Address 8106 Halyard Way

City Indianapolis State IN Zip Code 46236-9567

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

Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 13 / 2012  
**Transaction ID : C6B00495D4D54A5A53C**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Kenneth Robbins**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 Saverne Cir

City Little Rock State AR Zip Code 72223-9225

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

Name of Employer Radiology Consultants of Little Rock+ Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : DF1B63C2BE8140F3C2B**

Amount of Each Receipt this Period 250.00

**B. Anne Roberts**  
Full Name (Last, First, Middle Initial)

Mailing Address 9300 Campus Point Dr  
UCSD Med Ctr Thornton Hospital

City La Jolla State CA Zip Code 92037-1300

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

Name of Employer UCSD Medical Center Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 22 / 2012  
**Transaction ID : 9ADDB263-4B56-4C62-**

Amount of Each Receipt this Period 1000.00

**C. Russell Roberts Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 157 Nelson Blvd NW

City Rome State GA Zip Code 30165-2560

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

Name of Employer Univ of Arkansas for Medical Sci Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 16 / 2012  
**Transaction ID : 6A3BBB8C272CF0F946F**

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Martin Robinson</b>		Date of Receipt 03 / 31 / 2012 <b>Transaction ID : 15C59B84AFDA7F7B777</b>
Mailing Address 1515 Wetherborne Dr		Amount of Each Receipt this Period 250.00
City Little Rock	State AR	
Zip Code 72211-6125		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Michael Roossin</b>		Date of Receipt 03 / 20 / 2012 <b>Transaction ID : 3709EC751184F113BDC</b>
Mailing Address 9 Sea Shell		Amount of Each Receipt this Period 250.00
City Newport Coast	State CA	
Zip Code 92657-1705		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Newport Harbor Radiology Assoc.	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Wesley Root</b>		Date of Receipt 03 / 20 / 2012 <b>Transaction ID : ABB8F6FB8730CD59FC4</b>
Mailing Address 2604 Knox Cove Dr		Amount of Each Receipt this Period 250.00
City McKinleyville	State CA	
Zip Code 95519-3399		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Mid River Community Hospital	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Carol Rumack**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Univ of Colorado-Denver School of  
 13001 E 17th Place Box C-293  
 City Aurora State CO Zip Code 80045-2581  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Univ of Colorado School of Medecine Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 03 / 07 / 2012  
**Transaction ID : 5F3CD02045132FE7164**  
 Amount of Each Receipt this Period  
**1000.00**

**B. Mark Russell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 Whispering Hills St  
 City Hot Springs State AR Zip Code 71901-7319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hot Springs Radiology Svcs. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 03 / 21 / 2012  
**Transaction ID : DD13DDDD50A029A57F6**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Arthur Sandy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2821 Argyle Rd  
 City Birmingham State AL Zip Code 35213-3403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Advanced Imaging Assoc of AL Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 03 / 25 / 2012  
**Transaction ID : C8428FA6C29ACC7083C**  
 Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Richard Satre**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 134th St SW  
 Ste 120  
 City Everett State WA Zip Code 98204-5322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates, P.A. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 4049F25A2A35C6F1811**  
 Amount of Each Receipt this Period  
 250.00

**B. Scott Savader**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7340 Shadeland Sta  
 Irvington Radiologists PC, Ste 200  
 City Indianapolis State IN Zip Code 46256-3980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : 9A52F73593F354BC8E8**  
 Amount of Each Receipt this Period  
 250.00

**c. Albert Schraner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5300 Tufts St  
 City Davis State CA Zip Code 95618-7219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : B9145980CBA823239D0**  
 Amount of Each Receipt this Period  
 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Martin Schwartz</b>		Date of Receipt
Mailing Address 2090 Columbiana Rd Radiology Associates of Birmingham		MM / DD / YYYY 03 / 30 / 2012
City Vestavia	State AL	Zip Code 35216-2152
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 6ACB50DDECD8F0D0D09</b>
Name of Employer: Radiology Associates of Birmingham, PC		Amount of Each Receipt this Period
Occupation: Diagnostic Radiologist		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Donald Schwarz</b>		Date of Receipt
Mailing Address 6514 Copper Creek Dr		MM / DD / YYYY 03 / 30 / 2012
City Dallas	State TX	Zip Code 75248-3919
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 90166269CEAC4B2F5B0</b>
Name of Employer: Texas Oncology		Amount of Each Receipt this Period
Occupation: Radiation Oncologist		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Alfred Shaplin</b>		Date of Receipt
Mailing Address 910 Kimswick Manor Ln		MM / DD / YYYY 03 / 13 / 2012
City Ballwin	State MO	Zip Code 63011-5115
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 72F9ADB65518CAC9F26</b>
Name of Employer: Scott Radiological Group, Inc.		Amount of Each Receipt this Period
Occupation: Diagnostic Radiologist		5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Stephen Sides**  
Full Name (Last, First, Middle Initial)

Mailing Address 112 Allen Dr

City New Bern State NC Zip Code 28562-7751

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

Name of Employer Coastal Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
**03 / 29 / 2012**

**Transaction ID : 0FC EE49AAEA168F34C8**

Amount of Each Receipt this Period  
**80.00**

**B. Lonnie Simmons**  
Full Name (Last, First, Middle Initial)

Mailing Address 1900 South Ave  
Gundersen/Lutheran Med Center, # C

City La Crosse State WI Zip Code 54601-5467

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

Name of Employer Gundersen Lutheran Clinic Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt  
**03 / 20 / 2012**

**Transaction ID : C84D5F17CF2A7EABA83**

Amount of Each Receipt this Period  
**83.34**

**C. Christopher Simopoulos**  
Full Name (Last, First, Middle Initial)

Mailing Address 3467 Sherwood Ct

City Loomis State CA Zip Code 95650-8023

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

Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**03 / 30 / 2012**

**Transaction ID : 7CA7CA449006DD312F8**

Amount of Each Receipt this Period  
**300.00**

**SUBTOTAL** of Receipts This Page (optional)..... **463.34**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Rebecca Sivarajah**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Burgundy Dr

City Mohnnton State PA Zip Code 19540-8904

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

Name of Employer West Reading Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **03 / 09 / 2012**

**Transaction ID : FBFA55FC-8282-47F5-**

Amount of Each Receipt this Period **365.00**

**B. Michael Sloan**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1646

City Cheyenne State WY Zip Code 82003-1646

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

Name of Employer Casper Medical Imaging, P.C. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 13 / 2012**

**Transaction ID : C6E6DA3D62D473BDB45**

Amount of Each Receipt this Period **500.00**

**C. Timothy Sloan**  
Full Name (Last, First, Middle Initial)

Mailing Address 5301 Trent Woods Dr

City Trent Woods State NC Zip Code 28562-7443

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

Name of Employer Coastal Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **03 / 29 / 2012**

**Transaction ID : A9BBC06716F25864A6E**

Amount of Each Receipt this Period **80.00**

**SUBTOTAL** of Receipts This Page (optional)..... **945.00**

**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 75 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Paul Smart**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 150850  
 City Cape Coral State FL Zip Code 33915-0850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt  
 03 / 13 / 2012  
**Transaction ID : 503D1C81721BF6DB97D**  
 Amount of Each Receipt this Period  
 250.00

**B. Geoffrey Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 419 S Washington St Casper Medical Imaging, Ste 101  
 City Casper State WY Zip Code 82601-2951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Casper Medical Imaging Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1500.00

Date of Receipt  
 03 / 13 / 2012  
**Transaction ID : ECAB6E3C40C7299F589**  
 Amount of Each Receipt this Period  
 1500.00

**C. Kevin L Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1406 6th Ave N Regional Diagnostic Radiology  
 City Saint Cloud State MN Zip Code 56303-1900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Regional Diagnostic Radiology Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 625.02

Date of Receipt  
 03 / 15 / 2012  
**Transaction ID : F63FE461C55B7D6CC38**  
 Amount of Each Receipt this Period  
 208.34

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1958.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Todd Smith**

Mailing Address 18 Masters Cir

City Little Rock State AR Zip Code 72212-3304

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

Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : 904F5FD5202A9A34AC3**

Amount of Each Receipt this Period 250.00

Full Name (Last, First, Middle Initial)  
**B. James Snay**

Mailing Address 1842 Reading Blvd

City Wyomissing State PA Zip Code 19610-2626

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

Name of Employer West Reading Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 21 / 2012  
**Transaction ID : B56CDA4A-EFBA-443A-**

Amount of Each Receipt this Period 365.00

Full Name (Last, First, Middle Initial)  
**C. Kirk So**

Mailing Address 6377 Ascot Dr

City Oakland State CA Zip Code 94611-2525

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

Name of Employer Boston Medical Center Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 04 / 2012  
**Transaction ID : FE03A3B1-006C-47C5-**

Amount of Each Receipt this Period 365.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 980.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Daniel Sommer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10891 Encino Dr  
 City State Zip Code  
 Oak View CA 93022-9245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pueblo Radiology Med Group Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 666.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : FAB9D249987468136C6**  
 Amount of Each Receipt this Period  
 666.72

**B. Adam Specht**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3309 Chappell Pl  
 City State Zip Code  
 Virginia Beach VA 23452-6290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Medical Center Radiologists, Inc Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : 31A1E56A202C4B6CA71**  
 Amount of Each Receipt this Period  
 300.00

**C. Thomas St Amour**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14116 Belle Pointe Dr  
 City State Zip Code  
 Little Rock AR 72212-3697  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Radiology Consultants of Little Rock Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : DDB6728AE03ABD0C8D0**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1216.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 115
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. James Steidler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1806 Vela Pl  
 City Davis State CA Zip Code 95618-6760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 637E02E8EF94396F679**  
 Amount of Each Receipt this Period  
**300.00**

**B. Eric Stein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 S Bryn Mawr Ave  
 Bryn Mawr Hospital  
 City Bryn Mawr State PA Zip Code 19010-3121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Associates of the Main Line Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **216.68**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : 19A2B3AE075D5148039**  
 Amount of Each Receipt this Period  
**108.34**

**c. Mark Stephan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 Mondavi Dr  
 City Lafayette State LA Zip Code 70503-6635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2012  
**Transaction ID : F4BE31B3-86DA-47BF-**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1408.34</b>
<b>TOTAL</b> 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 79 OF 115
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Stephan Stockberger Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12909 Rocky Pointe Rd  
 City State Zip Code  
 Mc Cordsville IN 46055-9582  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Irvington Radiologists, P.C. Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : F5FBDFB43689BA92FAE**  
 Amount of Each Receipt this Period  
 250.00

**B. Richard Strax**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8719 Pasture View Ln  
 City State Zip Code  
 Houston TX 77024-7040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Greater Houston Radiology Association Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : B7A1C2F67A4B4F0B744**  
 Amount of Each Receipt this Period  
 1000.00

**C. Robert Stuckey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 Buckland Cir  
 City State Zip Code  
 Little Rock AR 72223-4534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Radiology Consultants of Little Rock Diagnostic Radiologist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : D2D0BCE90BA3D106C13**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> 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 80 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Daniel Sulser**  
Full Name (Last, First, Middle Initial)

Mailing Address 5280 Squaw Creek Rd

City Casper State WY Zip Code 82604-4257

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

Name of Employer Casper Medical Imaging, P.C. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 13 / 2012  
**Transaction ID : 16A580D55B9C122C62D**

Amount of Each Receipt this Period 500.00

**B. Richard Szucs**  
Full Name (Last, First, Middle Initial)

Mailing Address 3526 Crossings Way

City Midlothian State VA Zip Code 23113-6348

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

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : F9B16366E29DD50A209**

Amount of Each Receipt this Period 750.00

**C. Jay Tartell**  
Full Name (Last, First, Middle Initial)

Mailing Address 8940 56th Ave

City Elmhurst State NY Zip Code 11373-4933

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

Name of Employer Advanced Radiological Imaging Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 20A48E3B702D81AF1BA**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Sean Theisen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1346 Whispering Maples Ct  
 City Ann Arbor State MI Zip Code 48108-2492  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Huron Valley Radiology Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : 2353C628678B5C07841**  
 Amount of Each Receipt this Period  
 500.00

**B. William Theurer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 509 Country View Pl  
 City Camarillo State CA Zip Code 93010-8462  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pueblo Radiology Medical Group Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.74

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : EB4FC523BCEBFA62E32**  
 Amount of Each Receipt this Period  
 916.74

**C. Julie Timins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 Footes Ln  
 City Morristown State NJ Zip Code 07960-6356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : A6572B72189E0682099**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2416.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 115
	<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 College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Thuan Tran**

Mailing Address 27482 Paseo Arco Clave

City San Juan Capistran State CA Zip Code 92675-1896

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

Name of Employer Newport Harbor Radiology Associates Me Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 20 / 2012  
**Transaction ID : 91ADC3662CB81FC883E**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Scott Truhlar**

Mailing Address 221 E College St Apt 1208

City Iowa City State IA Zip Code 52240-1757

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

Name of Employer Radiologic Medical Services, P.C. Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 13 / 2012  
**Transaction ID : 705B5BF3D1BC1ED278E**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. William Van Dalsem**

Mailing Address 471 Old Newport Blvd Newport Harbor Radiology Associate

City Newport Beach State CA Zip Code 92663-4244

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

Name of Employer Newport Harbor Rad Assoc Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 20 / 2012  
**Transaction ID : 32C7C75B32A35554109**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Nicolas Von Dem Bussche**  
Full Name (Last, First, Middle Initial)

Mailing Address 18662 Via Torino

City Irvine State CA Zip Code 92603-3438

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

Name of Employer Newport Harbor Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 20 / 2012  
**Transaction ID : 5DA0F8D1E3F7178CB5F**

Amount of Each Receipt this Period  
250.00

**B. Brent Wagner**  
Full Name (Last, First, Middle Initial)

Mailing Address 6th and Spruce St  
Reading Hospital

City West Reading State PA Zip Code 19611-1428

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

Name of Employer West Reading Radiology Associates Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 0A4839F6-383A-48A7-**

Amount of Each Receipt this Period  
1000.00

**C. Joshua Walsh**  
Full Name (Last, First, Middle Initial)

Mailing Address 6430 E Miramar Dr

City Tucson State AZ Zip Code 85715-3117

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

Name of Employer Arizona State Radiology Occupation Diagnostic Radiologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
03 / 02 / 2012  
**Transaction ID : 687D33263A902ECA08D**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. James Webb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9132 E 101st Pl  
 City Tulsa State OK Zip Code 74133-6912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Univ of Oklahoma Health Sci Ctr Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 20 / 2012**  
**Transaction ID : A625D409F6815722E88**  
 Amount of Each Receipt this Period **250.00**

**B. David W. Weiss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Northwest Ct  
 City Little Rock State AR Zip Code 72212-1513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 31 / 2012**  
**Transaction ID : 5F9E34943529E2B2FD9**  
 Amount of Each Receipt this Period **250.00**

**C. Simon Westacott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1965 Glendower Dr  
 City Lancaster State PA Zip Code 17601-4945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 13 / 2012**  
**Transaction ID : 87A6DED24C7A4854C34**  
 Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **600.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Perry Wethington**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12060 Landover Ln  
 City Fishers State IN Zip Code 46037-9548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : 1FC19864ECAF51CF60D**  
 Amount of Each Receipt this Period  
**250.00**

**B. Patrick Weybright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1234 Mastersonville Rd  
 City Manheim State PA Zip Code 17545-9461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : 245852CCD5D11B7F1D4**  
 Amount of Each Receipt this Period  
**100.00**

**C. Winston Whitney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2189 Tustin Ave  
 City Costa Mesa State CA Zip Code 92627-1864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newport Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012  
**Transaction ID : 0812959EA83441751EE**  
 Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **600.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. Alan Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 Robinwood Dr  
 City Little Rock State AR Zip Code 72227-2238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiology Consultants of Little Rock Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2012**  
**Transaction ID : B95144ECC4EDB812298**  
 Amount of Each Receipt this Period  
**250.00**

**B. Richard Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 State St Hamot Medical Center  
 City Erie State PA Zip Code 16550-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hamot Medical Center Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**  
**Transaction ID : A981B2214E5BCD53D23**  
 Amount of Each Receipt this Period  
**500.00**

**C. Scott Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31461 Paseo Diosa  
 City San Juan Capistran State CA Zip Code 92675-1842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newport Harbor Radiology Associates Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2012**  
**Transaction ID : F955C8A66C54216531C**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> 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 87 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. David Winfield**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 Expo Pkwy  
 City Sacramento State CA Zip Code 95815-4227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 2FA116F051610267F45**  
 Amount of Each Receipt this Period  
**300.00**

**B. Dylan Witt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3636 Washoe St  
 City Davis State CA Zip Code 95618-5087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiological Assoc. of Sacramento Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 688885A76DB25FFFC34**  
 Amount of Each Receipt this Period  
**300.00**

**C. Mark Wittry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10525 Concord School Rd  
 City Saint Louis State MO Zip Code 63128-1232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer West County Radiological Group, Inc. Occupation Cardiac Radiologist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **255.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012  
**Transaction ID : FC2F700700E84393B4B**  
 Amount of Each Receipt this Period  
**85.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>685.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 115
	<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 College of Radiology Association Political Action Committee**

**A. John Wrench**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 Canon Dr  
 City Santa Barbara State CA Zip Code 93105-2636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pueblo Radiology Medical Group, Inc. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **916.74**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2012  
**Transaction ID : 5117C3AF32707A03895**  
 Amount of Each Receipt this Period  
**916.74**

**B. Joseph Yedlicka**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9034 Bay Breeze Ct  
 City Indianapolis State IN Zip Code 46236-9170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Irvington Radiologists, P.C. Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : C53797295A37F1A3C46**  
 Amount of Each Receipt this Period  
**250.00**

**C. Melissa Yu**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 Ventana Ridge Dr  
 City Aliso Viejo State CA Zip Code 92656-1849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Newport Harbor Radiology Associates Me Occupation Diagnostic Radiologist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012  
**Transaction ID : 52B30D9D80F7C1A6780**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1416.74</b>
<b>TOTAL</b> 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 89 OF 115  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**H. Jay Zeskind**

Mailing Address 4870 Park Hill Ct

City West Bloomfield      State MI      Zip Code 48323-3556

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

Name of Employer Diagnostic Radiology Consultants, PC      Occupation Diagnostic Radiologist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2012

**Transaction ID : 40C215FF27D7F73B618**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City      State      Zip Code

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City      State      Zip Code

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	125631.90

**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 90 OF 115
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American College of Radiology Association Political Action Committee**

**A. Geoff Davis for Congress**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 17192

City Ft Mitchell	State KY	Zip Code 41017
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00369470

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2012

**Transaction ID : 7A34D73633C65FF1760**

Amount of Each Receipt this Period  
1000.00

Refund of Contribution - Not Seeking Re-Election

**B. Snowe for Senate**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2012

City Portland	State ME	Zip Code 04104
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00291955

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2012

**Transaction ID : DA99074BF490F6E3F1A**

Amount of Each Receipt this Period  
5000.00

Refund from Campaign - not running anymore

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address \_\_\_\_\_

City _____	State _____	Zip Code _____
------------	-------------	----------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
\_\_\_\_\_

Date of Receipt  

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

Amount of Each Receipt this Period  
\_\_\_\_\_

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bank of America - Hard**

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 28261-7025

Purpose of Disbursement  
290

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 4B3D6A9B862FC2E3030**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Allyson Schwartz for Congress**

Mailing Address PO Box 2232

City State Zip Code  
Jenkintown PA 19046

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Allyson Y. Schwartz**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2012

Transaction ID : 0144A6C1BBD1959FC5F

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Benishek for Congress, Inc.**

Mailing Address PO Box 108

City State Zip Code  
Gladstone MI 49837-0108

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Daniel J. Benishek**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

Transaction ID : BF51FF1C7A129B7D58E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Benishek for Congress, Inc.**

Mailing Address PO Box 108

City State Zip Code  
Gladstone MI 49837-0108

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Daniel J. Benishek**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

Transaction ID : DC72E490CE703CA8CAD

Amount of Each Disbursement this Period

5000.00

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

8000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Berg for Senate**

Mailing Address PO Box 9394

City Fargo State ND Zip Code 58106

Purpose of Disbursement  
2012 General

011

Candidate Name

**Rick Berg**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: ND District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2012

**Transaction ID : 618DACA9F6474C6DF9D**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Bilirakis for Congress**

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Gus Michael Bilirakis**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2012

**Transaction ID : 07B1BAEBEC8AA46507E**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Bilirakis for Congress**

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement  
2012 General

011

Candidate Name

**Gus Michael Bilirakis**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2012

**Transaction ID : D944DCD56EF200139B5**

Amount of Each Disbursement this Period

2000.00

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

8000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Blue Dog Political Action Committee**

Mailing Address 6849 Old Dominion Drive  
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Blue Dog Political Action Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2012

**Transaction ID : A3104AD706D44BBF324**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Bob Casey for Senate Inc**

Mailing Address 30 South 15th Street Suite 400

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement  
2012 General

011

Candidate Name

**Robert P. Casey Jr**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: PA District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : BF77533F407A0148E6D**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Bobby Schilling for Congress**

Mailing Address 367 Avenue of the Cities Suite D

City East Moline State IL Zip Code 61244

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Robert Schilling**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: IL District: 17

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2012

**Transaction ID : 4B5EC66E6A84A59FD03**

Amount of Each Disbursement this Period

2000.00

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

12000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Braley for Congress**

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement  
2012 General

011

Candidate Name

**Bruce L. Braley**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : C0F28605C3C6B812B7C**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. BrettPAC-the Leadership PAC of U.S.Representative Brett Guthrie**

Mailing Address 504 Derek Avenue

City Elizabethtown State KY Zip Code 42701-9168

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**BrettPAC-the Leadership PAC of U.S.Representative Brett Guthrie**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2012

**Transaction ID : 960C0514235D6CBE2CC**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Brian Bilbray for Congress**

Mailing Address 970 Seacoast Drive  
# 7

City Imperial Beach State CA Zip Code 91932-2402

Purpose of Disbursement  
2012 General

011

Candidate Name

**Brian P. Bilbray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

**Transaction ID : C0DC2FB23D1218A3D2E**

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Campaign for Primary Accountability Inc**

Mailing Address 3900 Essex Lane Suite 250

City Houston State TX Zip Code 77027

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Campaign for Primary Accountability Inc**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2012

Transaction ID : 5E90BD87209AB0F45E7

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Castor for Congress**

Mailing Address 301 W Platt Street, #385

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Katherine Anne Castor**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 14

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

Transaction ID : 7ACF30CFEF71953F3D3

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Cathy McMorris Rodgers for Congress**

Mailing Address Box 137

City Spokane State WA Zip Code 99210-0137

Purpose of Disbursement  
2012 General

011

Candidate Name

**Cathy McMorris Rodgers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2012

Transaction ID : 282B729E05625E13383

Amount of Each Disbursement this Period

5000.00

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

12000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Chuck Fleischmann for Congress Committee, Inc.**

Mailing Address PO Box 11091

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Charles J. Fleischmann**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : 7B89C5E63FE183FFB8D**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Citizens for Altmire**

Mailing Address PO Box 1776

City Freedom State PA Zip Code 15042

Purpose of Disbursement  
2012 General

011

Candidate Name

**Jason Altmire**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2012

**Transaction ID : 04F7B536272480B7E46**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. Coffman for Congress 2012**

Mailing Address 9249 South Broadway #200-501

City Highlands Ranch State CO Zip Code 80129

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Mike Coffman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2012

**Transaction ID : 6EFA3A1BABF796945FC**

Amount of Each Disbursement this Period

2000.00
---------

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

6000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Crawford for Congress**

Mailing Address PO Box 16956

City Jonesboro State AR Zip Code 72403

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Eric Alan Crawford**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: AR District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

Transaction ID : **BB1816D227AE3A82290**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Daniel Webster for Congress**

Mailing Address 3400 Old Winter Garden Road

City Orlando State FL Zip Code 32805

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Daniel K. Webster**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

Transaction ID : **1CACB88F54A82BAF592**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. David Scott for Congress**

Mailing Address PO Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**David Albert Scott**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: GA District: 13

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

Transaction ID : **E4767D927A7A194A6B4**

Amount of Each Disbursement this Period

2000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Denham for Congress**

Mailing Address 2150 River Plaza Dr., #150

City Sacramento State CA Zip Code 95833

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Jeffrey Denham**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 10

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

Transaction ID : **AB6077CA986CC3609AC**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Flinn for Congress**

Mailing Address 1661 Aaron Brenner Drive  
Suite 300

City Memphis State TN Zip Code 38120

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**George S. Flinn Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TN District: 09

Date of Disbursement

MM / DD / YYYY  
03 / 09 / 2012

Transaction ID : **C0572DDE19C925289A0**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Flinn for Congress**

Mailing Address 1661 Aaron Brenner Drive  
Suite 300

City Memphis State TN Zip Code 38120

Purpose of Disbursement  
2012 General

011

Candidate Name

**George S. Flinn Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TN District: 09

Date of Disbursement

MM / DD / YYYY  
03 / 09 / 2012

Transaction ID : **4FE305591DA0F22AA8F**

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Chris Murphy**

Mailing Address PO Box 127

City Cheshire State CT Zip Code 06410

Purpose of Disbursement  
2012 General

011

Candidate Name

**Christopher S. Murphy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CT District:

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2012

**Transaction ID : 73E1784F674C92BAEE5**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Friends of Frank Guinta**

Mailing Address PO Box 877

City Manchester State NH Zip Code 03105-0877

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Frank Guinta**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : E518BE46DD8FCE658A9**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Lois Capps**

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement  
2012 General

011

Candidate Name

**Lois Capps**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

MM / DD / YYYY  
03 / 11 / 2012

**Transaction ID : 57220A3184F0E2B129B**

Amount of Each Disbursement this Period

1000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Nan Hayworth**

Mailing Address PO Box 188

City Carmel State NY Zip Code 10512

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Nan Alison Sutter Hayworth**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

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

**Transaction ID : 891ED84823C68E52019**

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. Friends of Rich Nugent**

Mailing Address PO Box 15668

City Brooksville State FL Zip Code 34604-0122

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Richard B. Nugent**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 11

Date of Disbursement

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

**Transaction ID : FF20D919B9F3EFD83B3**

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Gop Generation Y Fund**

Mailing Address PO Box 9055

City Peoria State IL Zip Code 61612

Purpose of Disbursement  
2012 Contribution

011

Category/  
Type

Candidate Name

**Gop Generation Y Fund**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

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

**Transaction ID : 84E79D6E2627AABC10A**

Amount of Each Disbursement this Period

5	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	0	0	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gregg Harper for Congress**

Mailing Address Post Office Box 54344

City Pearl State MS Zip Code 39288

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Gregory Harper**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MS District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2012

**Transaction ID : B0F141828C00C09246D**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Hansen Clarke for Congress**

Mailing Address 2900 E. Jefferson Avenue, Ste. C4

City Detroit State MI Zip Code 48207

Purpose of Disbursement  
2012 General

011

Candidate Name

**Hansen Clarke**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 14

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

**Transaction ID : EA97C6F35CC5671D1CA**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Hansen Clarke for Congress**

Mailing Address 2900 E. Jefferson Avenue, Ste. C4

City Detroit State MI Zip Code 48207

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Hansen Clarke**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 14

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

**Transaction ID : 8B4636FAE3D5E02923B**

Amount of Each Disbursement this Period

5000.00

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

12000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Hoosiers for Rokita, Inc.**

Mailing Address 7643 East U.S. 36

City Avon State IN Zip Code 46123

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Theodore Edward Rokita**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IN District: 04

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

Transaction ID : 720B7F0C85C37F8C9B2

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. House Conservatives Fund**

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**House Conservatives Fund**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

Transaction ID : A87C5516FE8547CE6DA

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Jim Gerlach for Congress Committee**

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480-0087

Purpose of Disbursement  
2012 General

011

Candidate Name

**James W. Gerlach**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2012

Transaction ID : EB2D43CEF2A7C1E6859

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John Sullivan for Congress, Inc**

Mailing Address Post Office Box 470840

City Tulsa State OK Zip Code 74147

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**John A. Sullivan**

Office Sought:  House  
 Senate  
 President  
State: OK District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : 906507F1480F1F4E42F**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Johnson for Congress**

Mailing Address PO Box 14496

City Poland State OH Zip Code 44514

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Bill Johnson**

Office Sought:  House  
 Senate  
 President  
State: OH District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

**Transaction ID : 4A9178829AB8D4C0E7A**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Judy Biggert for Congress**

Mailing Address PO Box 4198

City Naperville State IL Zip Code 60567

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Judy Biggert**

Office Sought:  House  
 Senate  
 President  
State: IL District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2012

**Transaction ID : 835E3DF649BE018FD83**

Amount of Each Disbursement this Period

2500.00

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

8500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Keystone America PAC**

Mailing Address 700 13th Street  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
2012 Contribution

**011**  
Category/  
Type

Candidate Name

**Keystone America PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

**03 / 27 / 2012**

**Transaction ID : D8C76DF61CC369D2BE3**

Amount of Each Disbursement this Period

**5000.00**

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
2012 Primary

**011**  
Category/  
Type

Candidate Name

**Ron Kind**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: WI District: 03

Date of Disbursement

**03 / 07 / 2012**

**Transaction ID : E512699DA101C1986E4**

Amount of Each Disbursement this Period

**2000.00**

Full Name (Last, First, Middle Initial)

**C. Kinzinger for Congress**

Mailing Address PO Box 487

City New Lenox State IL Zip Code 60451-0487

Purpose of Disbursement  
2012 General

**011**  
Category/  
Type

Candidate Name

**Adam Kinzinger**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: IL District: 16

Date of Disbursement

**03 / 07 / 2012**

**Transaction ID : F4D36A3E918E4D8AD11**

Amount of Each Disbursement this Period

**4000.00**

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

**11000.00**

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

**11000.00**

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kurt Schrader for Congress**

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Kurt Schrader**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	2

**Transaction ID : F44C5E067DFB9B4AC45**

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Latta for Congress**

Mailing Address PO Box 106

City Bowling Green State OH Zip Code 43402-0106

Purpose of Disbursement  
2012 General

011

Category/  
Type

Candidate Name

**Robert E. Latta**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 05

Date of Disbursement

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

**Transaction ID : AE7196A489279422D4E**

Amount of Each Disbursement this Period

3	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Lead Your Nation Now PAC (LYNN PAC)**

Mailing Address PO Box 1872

City Topeka State KS Zip Code 66601

Purpose of Disbursement  
2012 Contribution

011

Category/  
Type

Candidate Name

**Lead Your Nation Now PAC (LYNN PAC)**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

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

**Transaction ID : 8F79C2C219E4B2B0E6E**

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

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

8	5	0	0	0	0
---	---	---	---	---	---

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

8	5	0	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lead Your Nation Now PAC (LYNN PAC)**

Mailing Address PO Box 1872

City Topeka State KS Zip Code 66601

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Lead Your Nation Now PAC (LYNN PAC)**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	2

Transaction ID : 3C30ADD601CC3730E96

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Lone Star Leadership PAC**

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Lone Star Leadership PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	2

Transaction ID : 94A264DF859FD529AE0

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Making Business Excel Political Action Committee**

Mailing Address PO Box 3241

City Cheyenne State WY Zip Code 82003

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Making Business Excel Political Action Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

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

Transaction ID : A8327F4654A9902BDE3

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

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

9	0	0	0	.	0	0
---	---	---	---	---	---	---

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

9	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Marino for Congress**

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Thomas Anthony Marino**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 10

Date of Disbursement

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

**Transaction ID : D2B11371A5BE71BA964**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Martin Heinrich for Senate**

Mailing Address PO Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement  
2012 General

011

Candidate Name

**Martin Heinrich**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NM District:

Date of Disbursement

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

**Transaction ID : 8890C51E37F6E5774B0**

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mary Bono Mack Committee**

Mailing Address PO Box 3370

City Palm Springs State CA Zip Code 92263-3370

Purpose of Disbursement  
2012 General

011

Candidate Name

**Mary Bono Mack**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	2

**Transaction ID : C6BFD58307E56FD1763**

Amount of Each Disbursement this Period

4	0	0	0	.	0	0
---	---	---	---	---	---	---

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. McHenry for Congress**

Mailing Address PO Box 1406

City Hickory State NC Zip Code 28603

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Patrick Timothy McHenry**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NC District: 10

Date of Disbursement

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

**Transaction ID : A977513127D36EBF903**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. National Republican Senatorial Committee**

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**National Republican Senatorial Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

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

**Transaction ID : 21FDA727C2A38502B89**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. National Republican Senatorial Committee**

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**National Republican Senatorial Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

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

**Transaction ID : D551B7E4776B8C9F5D6**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

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

1	2	5	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	2	5	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. National Republican Senatorial Committee**

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**National Republican Senatorial Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

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

**Transaction ID : BD3F8579BA07ED554A5**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Pascrell for Congress**

Mailing Address PO Box 640

City Totowa State NJ Zip Code 07511

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**William J. Pascrell Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: NJ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	2

**Transaction ID : FF71B4F17EBC2F5E6D7**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Pascrell for Congress**

Mailing Address PO Box 640

City Totowa State NJ Zip Code 07511

Purpose of Disbursement  
2012 General

011

Candidate Name

**William J. Pascrell Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: NJ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	2

**Transaction ID : 93B8CA010EDE1F6600A**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	0	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	0	0	0	0	0	0	0	0	0
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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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. People for Enterprise Trade and Economic Growth (PETE PAC)**

Mailing Address 7804 Evening Lane

City Alexandria State VA Zip Code 22306-2754

Purpose of Disbursement  
2012 Contribution

011

Candidate Name  
**People for Enterprise Trade and Economic Growth (PETE PAC)**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

**Transaction ID : 60D4BB3B237B051A93B**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Schakowsky for Congress**

Mailing Address PO Box 5130

City Evanston State IL Zip Code 60204

Purpose of Disbursement  
2012 Primary

011

Candidate Name  
**Janice D. Schakowsky**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: IL District: 09

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2012

**Transaction ID : B5C09A89FE35282054B**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Simpson for Congress**

Mailing Address 1487 Parkway Drive

City Blackfoot State ID Zip Code 83221

Purpose of Disbursement  
2012 Primary

011

Candidate Name  
**Michael K. Simpson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) **Contribution**

State: ID District: 02

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

**Transaction ID : 1455CA2C8373320DB08**

Amount of Each Disbursement this Period

1000.00

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Southerland for Congress**

Mailing Address PO Box 1692

City Lynn Haven State FL Zip Code 32444

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**William Steve Southerland II**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2012

Transaction ID : 11138DD0AA0C0E772F9

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Steve Fincher for Congress**

Mailing Address PO Box 11153

City Jackson State TN Zip Code 38308

Purpose of Disbursement  
2012 General

011

Candidate Name

**Stephen Lee Fincher**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

Transaction ID : B442719529449F36742

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Steve Israel for Congress Committee**

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement  
2012 General

011

Candidate Name

**Steve J. Israel**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

Transaction ID : 8D6FF027433B33190C6

Amount of Each Disbursement this Period

1000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Tim Murphy for Congress**

Mailing Address PO Box 24551

City Pttsburgh State PA Zip Code 15234

Purpose of Disbursement  
2012 General

011

Candidate Name

**Timothy F. Murphy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 18

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2012

**Transaction ID : 3C9335CF11A3657CE0B**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Tim Scott for Congress**

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407-5305

Purpose of Disbursement  
2012 General

011

Candidate Name

**Timothy Eugene Scott**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: SC District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

**Transaction ID : 2512E476CF6435638B5**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Voice for Freedom**

Mailing Address 2700 Cumberland Parkway, Suite 150

City Atlanta State GA Zip Code 30339

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Voice for Freedom**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : C2BE70ADC60FD25472F**

Amount of Each Disbursement this Period

5000.00

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

9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Votetipton.Com**

Mailing Address PO Box 1582

City Cortez State CO Zip Code 81321-1582

Purpose of Disbursement  
2012 Primary

Category/  
Type

Candidate Name

**Scott Randall Tipton**

Office Sought:  House  
 Senate  
 President  
State: CO District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 00EE955E13DA51FBB1D**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**American College of Radiology Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Julie Timins**

Mailing Address 20 Footes Ln

City State Zip Code  
Morristown NJ 07960-6356

Purpose of Disbursement

010

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 07 / 2012

Transaction ID : 1E496DB43AC02D7DF3D

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1000.00

1000.00