FEC FORM 3X	AND	ORT OF RE DISBURSE er Than An Author	MENTS		Office Use Only
1. NAME OF COMMITTEE (in fi		MAILING LABEL OR PRINT ₩	Example:If typing, typ over the lines	e	
American College of Land Land Land Land Land Land Land Land		on Political Action Comr	nittee		
Check if differ than previousl reported. (AC	Reston				
2. FEC IDENTIFICAT		CITY A		STATE	ZIPCODE 👗
C00343459		3. IS TH REPC		OR (/	MENDED A)
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Onl	Report(Q1) (c) Report(Q2) (5 Report(Q3) (2) Report(YE) (d)	Peport Feb 20 Mar 20 Ma	M3) X Jun M4) Jul 2 Primary (12P) Convention (12C General (30G)	20 (M6) Sep 20 (M7) Oc General	(12S) in the State of
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer NOTE : Submission of t	reasurer <u>DR W</u> Electronically Filec	to the best of my knowle illiam Herrington by DR William Herrin	gton	_ Date 06	
Office Use Only					FEC FORM 3X (Rev. 12/2004)

Image# 10990781327

FEC Form 3X (Rev. 02/2003)

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2 / 160

١	Vrite or Type Committee Name American College of Radiology Association P	olitical Action Committee	
F	Report Covering the Period: From:		Го:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010 Y Y Y		532260.11
	(b) Cash on Hand at Begining of Reporting Period	683829.94	
	(c) Total Receipts (from Line 19)	203321.69	596770.91
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	887151.63	1129031.02
7.	Total Disbursements (from Line 31)	104459.89	346339.28
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	782691.74	782691.74
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	

X 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

FE6AN026

### Image# 10990781328

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 160

Write or Type Committee Name

American College of Radiology Association Political Action Committee

Report Covering the Period: From:	D D Y Y W Y 01 2010	To: 0 5 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Contributions (other than loans) From:         <ul> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> <li>(i) Itemized (use Schedule A)</li> </ul> </li> </ol>	180474.68	509041.47
<ul> <li>(ii) Unitemized</li> <li>(iii) TOTAL (add Lines 11(a)(i) and (ii)</li> </ul>	22841.91 203316.59	85214.59 594256.06
<ul> <li>(b) Political Party Committees</li> <li>(c) Other Political Committees (such as PACs)</li></ul>	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	203316.59	594256.06
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	2500.00
7. Other Federal Receipts (Dividends, Interest, etc.)	5.10	14.85
<ol> <li>Transfers from Non-Federal and Levin Funds         <ul> <li>(a) Non-Federal Account                 (from Schedule H3)</li> </ul> </li> </ol>	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
<ol> <li>Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))</li> </ol>	203321.69	596770.91
). Total Federal Receipts (subtract Line 18(c) from Line 19)	203321.69	596770.91

FE6AN026

#### Image# 10990781329

# **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)		of Disbursements	4 / 160
II. DISBUR	SEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
• •	ditures: eral/Non-Federal n Schedule H4) Share	0.00	0.00
	deral Share	0.00	0.00
(b) Other Feder Expenditure	al Operating	0.00	194.00
	ing Expenditures , (a)(ii) and (b)) ►	0.00	194.00
2. Transfers to Affili		0.00	0.00
<ol> <li>Contributions to Federal Candidat and Other Politica</li> </ol>	es/Committees	104000.00	344000.00
4. Independent Exp		0.00	0.00
<ol> <li>Coordinated Expension</li> <li>Committees (2 U</li> </ol>	enditures Made by Party	0.00	0.00
,	s Made	0.00	0.00
		0.00	0.00
	ibutions To: ersons Other al Committees	0.00	0.00
	y Committees	0.00	0.00
( )	al Committees Cs)	0.00	0.00
( )	ution Refunds 8(a), (b), and (c)) 🕨	0.00	0.00
9. Other Disbursem	ents	459.89	2145.28
	Activity (2 U.S.C 431(20)) ral Election Activity		
(from Schedu (i) Federal S	lle H6) hare	0.00	0.00
(ii) "Levin" S	hare	0.00	0.00
	ion Activity Paid Entirely Funds	0.00	0.00
( )	I Election Activity (add (i), 30(a)(ii) and 30(b))	0.00	0.00
	ents (add Lines 21(c), 22,	104459.89	346339.28
	7, 28(d), 29 and 30(c))	104433.03	040003.20
	(a)(ii) and Line 30(a)(ii)		
from Line 31)		104459.89	346339.28

# **DETAILED SUMMARY PAGE**

of Disbursements

5 / 160

	5 / 160
IG COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	594256.06
0.00	0.00
203316.59	594256.06
0.00	194.00
0.00	0.00
0.00	194.00
-	Total This Period            203316.59            0.00            203316.59            0.00            0.00            0.00            0.00

FE6AN026

SCHEDULE A (FEC Form	ו 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 6 / 160           (check only one)         11a           X         11a           13         14           15         16				
Any information copied from such Repo or for commercial purposes, other than	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to so						
NAME OF COMMITTEE (In Full) American College of Radiology	Association Politic	al Action Committee					
Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Robert Gibbs	Full Name (Last, First, Middle Initial) Dr. Robert Gibbs						
Mailing Address 611 Quail Cree	Mailing Address 611 Quail Creek Rd						
City	State	Zip Code	Transaction ID: 34603846				
Parsons	KS	67357-2257	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		500.00				
Name of Employer Robert Charles Gibbs, M.D- ., L.L.C.	Occupation Diagnost	n ic Radiologist					
Receipt For:	Aggregate	Year-to-Date 🔻					
Other (specify) ▼	0 0	500.00					
Full Name (Last, First, Middle Initial) Dr. Kay Lozano			Date of Receipt				
Mailing Address 8100 E Union	Mailing Address 8100 E Union Ave Apt 2104						
City	State	Zip Code	0 5 0 4 2 0 1 0 Transaction ID: 34610643				
Denver	CO	80237-2979	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		2500.00				
Name of Employer Radiology Imaging Associa-	Occupation						
tion Receipt For:		ic Radiologist					
Primary General Other (specify) ▼		2500.00					
Full Name (Last, First, Middle Initial) Dr. James Jelinek	I		Date of Receipt				
Mailing Address Washington He 110 Irving St N			M M M / D D / Y Y Y Y Y 05 / 05 / 2010				
City Washington	State DC	Zip Code 20010-2975	Transaction ID: 34613494				
FEC ID number of contributing federal political committee.	C	20010-2373	Amount of Each Receipt this Period 45.00				
Name of Employer Center Radiology	Occupation	n ic Radiologist					
Receipt For:	i +	Year-to-Date V					
Primary General Other (specify) ▼		270.00					
SUBTOTAL of Receipts This Page (or	ptional)		3045.00				
TOTAL This Period (last page this line	,						

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 7 / 160         (check only one)				
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ny information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to su					
American College of Radiology Ass	ociation Political Action Committee					
Full Name (Last, First, Middle Initial) Dr. Janet Storella						
Mailing Address 6515 Fallwind Ln		Date of Receipt				
City	State Zip Code	Transaction ID: 34613495				
Bethesda	MD 20817-4941	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer Drs Grover, Christie & Me-	Occupation Diagnostic Radiologist					
rritt Receipt For:	Aggregate Year-to-Date V	-1				
Primary General Other (specify) ▼	320.00					
Full Name (Last, First, Middle Initial) Dr. Karen Goodhope		Date of Receipt				
Mailing Address 43 Aberdeen Pl		05 06 YYYY 05 006				
City	State Zip Code	Transaction ID: 34679596				
Saint Louis	MO 63105-2266	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	996.00				
Name of Employer Central Radiology Group	Occupation Diagnostic Radiologist					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	996.00					
Full Name (Last, First, Middle Initial) Dr. Paula George		Date of Receipt				
Mailing Address 15941 Kettington Re	d	M         M         /         D         D         /         Y				
City	State Zip Code	Transaction ID: 34679803				
Chesterfield	MO 63017-7329	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	996.00				
Name of Employer Central Radiology Group	Occupation Diagnostic Radiologist					
Receipt For:	Aggregate Year-to-Date 🔻					
<ul><li>Primary General</li><li>Other (specify) ▼</li></ul>	996.00					
SUBTOTAL of Receipts This Page (optiona	I I)	2032.00				
	ber only)					

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 8 / 160         (check only one)
Any or fo	information copied from such Reports and r commercial purposes, other than using th	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	IAME OF COMMITTEE (In Full) American College of Radiology Asso			
	ull Name (Last, First, Middle Initial) Dr. David Miller	Date of Receipt		
N	Aailing Address 1307 White Horse Ro	M M / D D / Y Y Y Y 05 06 2010		
	Sity	State	Zip Code	Transaction ID: 34713669
-	/oorhees	NJ	08043-2100	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
S	lame of Employer South Jersey Radiology As- ociates	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:		e Year-to-Date V	
	Other (specify) ▼		500.00	]
	ull Name (Last, First, Middle Initial) Dr. Randall Snyder, III	_		Date of Receipt
N	Aailing Address 7 Sheffield Ct			M M / D D / Y Y Y Y 05 06 2010
	Dity	State	Zip Code	Transaction ID: 34713675
_	Medford	NJ	08055-8301	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		500.00
5	lame of Employer South Jersey Radiology As- ociates, P.A	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	×	e Year-to-Date V	
	Other (specify) ▼		500.00	]
	ull Name (Last, First, Middle Initial) Dr. Cathleen Woomert			Date of Receipt
	Aailing Address 81 Maple Ridge Rd			M M / D D / Y Y Y Y 05 06 2010
	Dity	State	Zip Code	Transaction ID: 34713676
_		PA	17846-8933	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		5000.00
N	lame of Employer Geisinger Clinic	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	]
SU	BTOTAL of Receipts This Page (optional)			6000.00
	<b>TAL</b> This Period (last page this line numbe			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 9 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
∡ ٩.	Full Name (Last, First, Middle Initial) Dr. James Elder, JR	Date of Receipt		
	Mailing Address S Jersey Radiology As 1307 White Horse Rd	05 06 2010		
	City	State	Zip Code	Transaction ID: 34713678
	Voorhees	NJ	08043-2100	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As-	Occupatio		
	sociates Receipt For:	1 <b></b>	tic Radiologist	
	Primary General	Aggregate	e Year-to-Date	1
	Other (specify)	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Dr. Evan Shack	Date of Receipt		
	Mailing Address South Jersey Radiolog 901 Route 168 Ste 30	05 / D D / Y Y Y Y 06 / 2010		
	City	State	Zip Code	Transaction ID: 34713679
		NJ	08012-3210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As-	Occupatio	n tic Radiologist	
	sociates Receipt For:	, I – Č	e Year-to-Date V	
	Primary General Other (specify) ▼		500.00	]
-	Full Name (Last, First, Middle Initial) Dr. Lewis Samuel			Date of Receipt
-	Mailing Address 731 Yorktown Lane			M M / D D / Y Y Y Y 05 06 2010
	City	State	Zip Code	Transaction ID: 34714189
	Moorestown	NJ	08057-4416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As-	Occupatio	n tic Radiologist	
	sociates Receipt For:	1	e Year-to-Date V	
	Primary General Other (specify) ▼		500.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		1500.00
L	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 10 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17			
	or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person is or for commercial purposes, other than using the name and address of any political committee to so					
	American College of Radiology Associ	iation Politic	al Action Committee				
A.	Full Name (Last, First, Middle Initial) Dr. Larry Burr	Date of Receipt					
	Mailing Address Radiology Consultants 1948 First Ave NE	05 06 2010					
	City	State	Zip Code	Transaction ID: 34714191			
	Cedar Rapids	IA	52402-5321	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Radiology Consultants of Iowa	Occupation Diagnost	<sup>n</sup> ic Radiologist				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify) ▼	0 0	500.00				
- B.	Full Name (Last, First, Middle Initial) Dr. David Kramer			Date of Receipt			
	Mailing Address 6 Coles Court			05 06 2010			
	City	State	Zip Code	Transaction ID: 34714192			
	Moorestown	NJ	08057-1445	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer South Jersey Radiology As- sociates	1 · · · · ·	ic Radiologist				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_			
	Other (specify) ▼	0 0	500.00				
с.	Full Name (Last, First, Middle Initial) Dr. Mark Dannenbaum			Date of Receipt			
	Mailing Address 9 Shingle Oak Dr			05 06 Y Y Y Y 05 06 2010			
	City	State	Zip Code	Transaction ID: 34714193			
	Voorhees	NJ	08043-1553	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer South Jersey Radiology As- sociates	Occupatio Diagnost	<sup>n</sup> ic Radiologist				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_			
	Primary     General       Other (specify) ▼	0.0	500.00				
	SUBTOTAL of Receipts This Page (optional)			1500.00			
	TOTAL This Period (last page this line number	only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 11 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ			
Α.	Full Name (Last, First, Middle Initial) Dr. A Joseph Borelli, JR			Date of Receipt
	Mailing Address 15 Bear Island Rd			05 06 Y Y Y Y Y 05 06
	City	State	Zip Code	Transaction ID: 34714194
	Hilton Head Island FEC ID number of contributing federal political committee.	SC C	29926-1955	Amount of Each Receipt this Period
	Name of Employer MRI at Belfair	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
B.	Full Name (Last, First, Middle Initial) Dr. John Chang Mailing Address 1777 Ala Moana Blvd /	Apt 922		Date of Receipt
	City	State	Zip Code	0 5 0 7 2 0 1 0 Transaction ID: 34720854
	Honolulu	HI	96815-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Virtual Radiologic Receipt For:	, I – – – – – – – – – – – – – – – – – –	n tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
C.	Full Name (Last, First, Middle Initial) Dr. John Harding			Date of Receipt
	Mailing Address 702 Tranquility Turn			05 / D D / Y Y Y Y 02010
	City	State	Zip Code	Transaction ID: 34720855
	Marlton FEC ID number of contributing federal political committee.	NJ C	08053-5337	Amount of Each Receipt this Period
	Name of Employer South Jersey Radiology As- soc	, · · · · · · · · · · · · · · · · · · ·	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 500.00	
	SUBTOTAL of Receipts This Page (optional)			1300.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC I ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 12 / 160           (check only one)         11a           X         11a           13         14           15         16           17			
Any information copied from suc or for commercial purposes, othe NAME OF COMMITTEE (In	er than using the name and ad	son for the purpose of soliciting contributions to solicit contributions from such committee.				
American College of Rac	diology Association Politic	al Action Committee				
	Full Name (Last, First, Middle Initial) Dr. Thomas Sergi Mailing Address 729 Yorktown Ln					
City	State	Zip Code	Transaction ID: 34720856			
Moorestown	NJ	08057-4416	Amount of Each Receipt this Period			
FEC ID number of contributin federal political committee.	C		500.00			
Name of Employer South Jersey Radiology As-	Occupatio					
sociates Receipt For:	/	ic Radiologist				
Primary Gene		e Year-to-Date V	-			
Other (specify)		500.00				
Full Name (Last, First, Middle           Dr. Joshua S. Brodkin	e Initial)		Date of Receipt			
Mailing Address 11 Wood	I Glen Ln		05 07 Y Y Y Y 005 07			
City	State	Zip Code	Transaction ID: 34720857			
Voorhees	NJ	08043-9559	Amount of Each Receipt this Period			
FEC ID number of contributin federal political committee.	C		500.00			
Name of Employer South Jersey Radiology As- sociates	Occupatio Diagnost	<sup>n</sup> ic Radiologist				
Receipt For:		e Year-to-Date 🔻				
Other (specify) ▼	ral	500.00				
Full Name (Last, First, Middle Dr. John Curtis	I Initial)		Date of Receipt			
Mailing Address 5 Cortlan	nd Shire Dr		05 07 Y Y Y Y 05 07 2010			
City	State	Zip Code	Transaction ID: 34720858			
Moorestown	NJ	08057-3944	Amount of Each Receipt this Period			
FEC ID number of contributin federal political committee.	C		500.00			
Name of Employer South Jersey Radiology As- sociates	Occupatio Diagnost	<sup>n</sup> ic Radiologist				
Receipt For:		e Year-to-Date 🔻	_			
Other (specify) ▼	ra	500.00				
SUBTOTAL of Receipts This P	l lage (optional)		1500.00			
TOTAL This Period (last page t						

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 13 / 160           (check only one)         11a           X         11a           13         14           15         16
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Andrew Osiason			Date of Receipt
	Mailing Address 506 Julie Ct			05 / 07 / Y Y Y Y 020 10
	City	State	Zip Code	Transaction ID: 34720859
	Wyckoff	NJ	07481-1101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	270.00	
-	Full Name (Last, First, Middle Initial) Dr. David Panush	•		Date of Receipt
	Mailing Address 538 E 84th St Apt 4E			05 07 Y Y Y Y 05 07 2010
	City	State	Zip Code	Transaction ID: 34720860
	New York	NY	10028-7357	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		270.00	
	Full Name (Last, First, Middle Initial) Dr. Joel Rakow			Date of Receipt
	Mailing Address 505 Ivy Lane			05 07 2010
	City	State	Zip Code	Transaction ID: 34720861
	Wyckoff	NJ	07481-1072	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 270.00	]
Γ	CURTOTAL of Doppieto This Dags (anti-1)			90.00
	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number	only)		

~				FOR LINE NUMBER: PAGE 14 / 16	:0			
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)	0			
ITI	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12	_			
				13 14 15 16	17			
An or f	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribu or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such commi							
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,					
	American College of Radiology Associa	ation Politic	al Action Committee					
				1				
۹.	Full Name (Last, First, Middle Initial) Dr. Patrick Toth	Date of Receipt						
	Mailing Address 201 E 80th St Apt 8F			M M / D D / Y Y Y Y				
				05 07 2010				
	City	State	Zip Code	Transaction ID: 34720862				
	New York	NY	10021-0515	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		30.00				
	Name of Employer	Occupatio	n					
	Hackensack Rádiology Group	Diagnost	ic Radiologist					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General		270.00					
	Other (specify)	0 0						
3.	Full Name (Last, First, Middle Initial) Dr. John DeMeritt			Date of Receipt				
	Mailing Address 18 Baldwin Rd				Y			
	To Daidwirt fu			05 07 2010				
	City	State	Zip Code	Transaction ID: 34720863				
	Saddle River	NJ	07458-3203	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		30.00				
	Name of Employer	Occupatio	n	7				
	Hackensack Rádiology Group	Diagnost	ic Radiologist					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General Other (specify) ▼		270.00					
		0 0	0 0 0 0 0 0 0					
). 	Full Name (Last, First, Middle Initial) Dr. Rita S. Patel			Date of Receipt				
	Mailing Address 3 Ware Rd				Y			
				05 07 2010				
	City	State	Zip Code	Transaction ID: 34720864				
	Upper Saddle River	NJ	07458-1919	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		30.00				
	Name of Employer Hackensack Radiology Group	Occupatio		1				
	Receipt For:		ic Radiologist					
	Primary General	Aggregate	e Year-to-Date 🔻					
	Other (specify)	0 0	270.00					
<b>—</b>								
รเ	JBTOTAL of Receipts This Page (optional)			90.00				
т	<b>DTAL</b> This Period (last page this line number of	only)						

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 / 160			
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)			
			Detailed Summary Page				
	Any information copied from such Reports and St or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s					
	NAME OF COMMITTEE (In Full)						
	American College of Radiology Associa	ation Politic	cal Action Committee				
Α.	Full Name (Last, First, Middle Initial) Dr. Mitchell Miller		Date of Receipt				
	Mailing Address 2 Constitution Ct Apt 10	009		05 07 2010			
	City	State	Zip Code	Transaction ID: 34720865			
	Hoboken	NJ	07030-6730	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Hackensack Radiology Group	Occupatio	on tic Radiologist				
	Receipt For:		e Year-to-Date V				
	Primary General	33.094	270.00	1			
	Other (specify)	0 0	270.00	1			
В.	Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce			Date of Receipt			
	Mailing Address 509 48th Ave Apt 2A			05 07 2010			
	City	State	Zip Code	Transaction ID: 34720866			
	Long Island City	NY	11101-5604	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Hackensack Radiology Group	Occupation Diagnos	on tic Radiologist				
	Receipt For:		e Year-to-Date 🔻				
	Other (specify) ▼	0 0	270.00	]			
C.	Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone			Date of Receipt			
Ο.	Mailing Address 440 E 62nd St Apt 18F			05 07 2010			
	City	State	Zip Code	Transaction ID: 34720867			
	New York	NY	10065-8345	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		30.00			
	Name of Employer Hackensack Radiology Group	Occupatio Diagnos	on tic Radiologist				
	Receipt For:		e Year-to-Date 🔻				
	Other (specify) ▼		270.00	]			
	SUBTOTAL of Receipts This Page (optional)			90.00			
	<b>TOTAL</b> This Period (last page this line number of						

	E A (FEC Form 3) RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 16 / 160           (check only one)         X           X         11a         11b         11c         12           13         14         15         16         16
Any information or for commerce	copied from such Reports ar ial purposes, other than using	nd Statements may the name and add	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
	COMMITTEE (In Full) College of Radiology Ass	sociation Politic	al Action Committee	
Full Name ( Dr. Hiten Ma	Last, First, Middle Initial) gan Malde			Date of Receipt
Mailing Add	ress 7 Kinkaid Ave			0 5 / D D / Y Y Y Y 0 5 0 7 2 0 1 0
City		State	Zip Code	Transaction ID: 34720868
<u>Closter</u> FEC ID nun	nber of contributing	NJ	07624-2908	Amount of Each Receipt this Period 30.00
	cal committee.	C		
Name of En Hackensac	nployer KRadiology Group	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
Receipt For		Aggregate	Year-to-Date V	
Prima Other	ry General (specify) <b>▼</b>	0 0	270.00	
Full Name ( Dr. Kavita Pa	Last, First, Middle Initial)	<b>I</b>		Date of Receipt
Mailing Add				05 07 2010
City		State	Zip Code	Transaction ID: 34720869
Staten Isla		NY	10304-1301	Amount of Each Receipt this Period
	nber of contributing cal committee.	C		30.00
Name of En Hackensack	nployer Radiology Group	Occupatio Diagnost	n ic Radiologist	
Receipt For Prima Other			Year-to-Date ▼ 240.00	
Full Name ( Dr. Adam Bo	Last, First, Middle Initial)			Date of Receipt
Mailing Add	•	1509		0 5 0 7 2 0 1 0
City		State	Zip Code	Transaction ID: 34720870
New York		NY	10023-4132	Amount of Each Receipt this Period
	nber of contributing cal committee.	C		30.00
Name of En Hackensach	nployer Radiology Group	Occupatio Diagnost	n ic Radiologist	
Receipt For			Year-to-Date V	
Prima Other	ry General (specify) <b>▼</b>	0 0	270.00	
				90.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 17 / 160         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17					
Any information copied from such Reports a or for commercial purposes, other than usin	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full) American College of Radiology As	ssociation Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR		Date of Receipt					
Mailing Address Hackensack Unive 30 Prospect Ave	ersity Medical Ctr	0 5 / D D / Y Y Y Y Y 0 5 0 7 2 0 1 0					
City	State Zip Code	Transaction ID: 34720871					
Hackensack FEC ID number of contributing federal political committee.	NJ 07601-1914	Amount of Each Receipt this Period					
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00						
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert		Date of Receipt					
Mailing Address 124 W 60th St Ap	t 45	05 / D D / Y Y Y Y 05 / 07 2010					
City Now York	State Zip Code	Transaction ID: 34720872					
New York FEC ID number of contributing federal political committee.	NY 10023-7451	Amount of Each Receipt this Period 30.00					
Name of Employer Ackensack Radiology Group	Occupation Diagnostic Radiologist	]					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00						
Full Name (Last, First, Middle Initial) Dr. Josie Alpers		Date of Receipt					
Mailing Address 6609 E Split Rock	Cir	M M / D D / Y Y Y Y 05 07 2010					
City Sioux Follo	State Zip Code	Transaction ID: 34725396					
Sioux Falls FEC ID number of contributing federal political committee.	SD 57110-1306	Amount of Each Receipt this Period					
Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14						
SUBTOTAL of Receipts This Page (option	nal)	417.14					
	mber only)						

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	<b>3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 18 / 160         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17					
or for commercial purposes, other than us	ny information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to s						
American College of Radiology	Association Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. Joseph Baka							
Mailing Address 5104 S Daffodil	Mailing Address 5104 S Daffodil Cir						
City	State Zip Code	Transaction ID: 34725397					
Sioux Falls	SD 57108-2302	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	357.14					
Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist						
Receipt For:	Aggregate Year-to-Date V						
Primary     General       Other (specify) ▼	357.14						
Full Name (Last, First, Middle Initial) Dr. David Bean	1	Date of Receipt					
Mailing Address 2301 W Barringt	Mailing Address 2301 W Barrington Cir						
City	State Zip Code	Transaction ID: 34725398					
Sioux Falls	SD 57108-5024	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	357.14					
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14						
Full Name (Last, First, Middle Initial) Dr. Matthew Casey	1	Date of Receipt					
Mailing Address 209 W Saint And	drews Dr	0 5 0 7 Y Y Y Y 0 5 0 7 2 0 1 0					
City	State Zip Code	Transaction ID: 34725399					
Sioux Falls	SD 57108-2952	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	357.14					
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14						
SUBTOTAL of Receipte This Page (anti	onal)	1071.42					
	umber only)						

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 19 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17			
or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.			
American College of Radiology Ass	ociation Political Action Committee				
Full Name (Last, First, Middle Initial) Dr. Sabina Choudhry		Date of Receipt			
Mailing Address Medical X-Ray 1417 S Minnesota A	Mailing Address Medical X-Ray 1417 S Minnesota Ave				
City	State Zip Code	Transaction ID: 34725400			
Sioux Falls	SD 57105-1783	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	357.14			
Name of Employer Med X-Ray Center, P.C.	Occupation Radiation Oncologist				
Receipt For:	Aggregate Year-to-Date ▼				
Primary     General       Other (specify)     Image: Content of the specific spec	357.14				
Full Name (Last, First, Middle Initial) Dr. Thomas Cink		Date of Receipt			
1417 S Minnesota A	1417 S Minnesota Ave				
City Sioux Falls	State Zip Code SD 57105-1783	Transaction ID: 34725401			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist	1			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14				
Full Name (Last, First, Middle Initial)					
Dr. Daniel Crosby Mailing Address 305 W Spyglass Dri	ve	Date of Receipt			
City	State Zip Code	Transaction ID: 34725403			
Sioux Falls	SD 57108-6412	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		357.14			
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14				
SUBTOTAL of Receipts This Page (optional	)	1071.42			
TOTAL This Period (last page this line numb	<u> </u>				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 20 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associa			
Α.	Full Name (Last, First, Middle Initial) Dr. Edward Czarnecki			Date of Receipt
	Mailing Address 5108 Barrington Dr			M - M         /         D - D         /         Y - Y - Y         Y           0 5         0 7         2 0 1 0
	City	State	Zip Code	Transaction ID: 34725404
	Sioux Falls	SD	57108-5001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		357.14
	Name of Employer Med X-Ray Center, P.C.	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	357.14	
В.	Full Name (Last, First, Middle Initial) Dr. Susan Duffek			Date of Receipt
	Mailing Address 5501 S Spyglass Cir			M M / D D / Y Y Y Y 05 07 2010
	City	State	Zip Code	Transaction ID: 34725405
	Sioux Falls FEC ID number of contributing federal political committee.	SD	57108-6405	Amount of Each Receipt this Period
	Name of Employer Med X-Ray Center, P.C.	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 357.14	
C.	Full Name (Last, First, Middle Initial) Dr. Kirsten Erickson			Date of Receipt
0.	Mailing Address Medical X-Ray Center 1417 S Minnesota Ave			0 5 0 7 2 0 1 0
	City	State	Zip Code	Transaction ID: 34725408
	Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		357.14
	Name of Employer Medical X-Ray Center	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 357.14	
	SUBTOTAL of Receipts This Page (optional)			1071.42
	TOTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 21 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17					
Any information copied from such Reports or for commercial purposes, other than usir	Iny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full)	ssociation Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. Gary Famestad		Date of Receipt					
	Mailing Address Medical X-Ray Center 1417 S Minnesota Ave						
City	State Zip Code	Transaction ID: 34725409					
Sioux Falls FEC ID number of contributing federal political committee.	SD 57105-1715	Amount of Each Receipt this Period 357.14					
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist	-					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14						
Full Name (Last, First, Middle Initial) Dr. Charles Flohr		Date of Receipt					
Mailing Address 723 E Greenbrier	PI	05 / D D / Y Y Y Y 05 / 07 / 2010					
City	State Zip Code	Transaction ID: 34725410					
Sioux Falls FEC ID number of contributing federal political committee.	SD 57108-6421	Amount of Each Receipt this Period 357.14					
Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist	-					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14						
Full Name (Last, First, Middle Initial) Dr. Thomas Free		Date of Receipt					
Mailing Address 3551 S Spencer E	Blvd	0 5 0 7 Y Y Y Y 0 5 0 7 2 0 1 0					
City	State Zip Code	Transaction ID: 34725411					
Sioux Falls FEC ID number of contributing federal political committee.	SD 57103-4654	Amount of Each Receipt this Period 357.14					
Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist	_					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14						
SUBTOTAL of Receipts This Page (optio	nal)	1071.42					
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 22 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports a or for commercial purposes, other than using	ny information copied from such Reports and Statements may not be sold or used by any persor r for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. Christopher Gregory		Date of Receipt					
Mailing Address 5700 S Lazy Ridge	PI	05 / D D / Y Y Y Y 05 / 07 2010					
City	State Zip Code	Transaction ID: 34725412					
Sioux Falls FEC ID number of contributing	SD 57108-5235	Amount of Each Receipt this Period					
federal political committee.							
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist						
Receipt For:	Aggregate Year-to-Date ▼						
Other (specify) ▼	357.14	]					
Full Name (Last, First, Middle Initial) Dr. Matthew Helgeson		Date of Receipt					
Mailing Address Medical Xray Center 1417 S Minnesota		M M / D D / Y Y Y Y 05 07 2010					
City	State Zip Code	Transaction ID: 34725413					
Sioux Falls	SD 57105-1715	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		357.14					
Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	_					
Receipt For:	Aggregate Year-to-Date V						
Primary     General       Other (specify) ▼	357.14	]					
Full Name (Last, First, Middle Initial) Dr. Michael Kihne	I	Date of Receipt					
Mailing Address Medical X-Ray Cer 1417 S Minnesota		M M / D D / Y Y Y Y 05 07 2010					
City	State Zip Code	Transaction ID: 34725414					
Sioux Falls	SD 57105-1715	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		357.14					
Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14	]					
SUBTOTAL of Receipts This Page (optional	al)	1071.42					
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 23 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Jonah Luzier			Date of Receipt
	Mailing Address 1100 Goldthread Cir			0 5 0 7 Y Y Y Y 0 5 0 7 2 0 1 0
	City	State	Zip Code	Transaction ID: 34725415
	Sioux Falls	SD	57108-2824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		357.14
	Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 357.14	]
В.	Full Name (Last, First, Middle Initial) Dr. Steven McGraw Mailing Address 27209 Fountain Cir			Date of Receipt
	City	State	Zip Code	0 5 0 7 2 0 1 0 Transaction ID: 34725417
	Harrisburg	SD	57032-8122	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		357.14
	Name of Employer Med X-Ray Center, P.C.		n Oncologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 357.14	]
С.	Full Name (Last, First, Middle Initial) Dr. Patrick Nelson			Date of Receipt
	Mailing Address Medical X-Ray Center F 1417 S Minnesota Ave	PC		M · M         /         D · D         Y         Y · Y · Y         Y
	City <u>Sioux Falls</u>	State SD	Zip Code 57105-1783	Transaction ID: 34725419 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		357.14
	Name of Employer Medical X-Ray Center PC	Occupatio Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 357.14	
	SUBTOTAL of Receipts This Page (optional)			1071.42
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>()</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 24 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17			
Any information copied from such Reports an or for commercial purposes, other than using	Iny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s					
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politica	I Action Committee				
Full Name (Last, First, Middle Initial)			Date of Receipt			
Mailing Address 1417 S Minnesota A	Ave		05 / D D / Y Y Y Y 05 / 07 2010			
City	State	Zip Code	Transaction ID: 34725420			
Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		357.14			
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic	c Radiologist				
Receipt For:	Aggregate	Year-to-Date V				
Other (specify)		357.14				
Full Name (Last, First, Middle Initial) Dr. Brad Paulson			Date of Receipt			
Mailing Address Medical X-Ray Cen 1417 S Minnesota A			05 / 07 / Y Y Y Y 2010			
City	State	Zip Code	Transaction ID: 34725421			
Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		357.14			
Name of Employer Medical X-Ray Center	Occupation Diagnostic	c Radiologist				
Receipt For:	Aggregate	Year-to-Date 🔻				
Primary   General     Other (specify)   The second seco	0 0	357.14				
Full Name (Last, First, Middle Initial) Dr. Daryl Rife			Date of Receipt			
Mailing Address 5705 S Shadow Ric	· · ·					
City	State	Zip Code	Transaction ID: 34725422			
Sioux Falls	SD	57108-2006	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		357.14			
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic	c Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 357.14				
SUBTOTAL of Receipts This Page (optiona	al)		1071.42			
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Mailing Address     2005 S Pendar Lane       City     State     Zip Code	Date of Receipt 0 5 / 0 7 / 2 0 1 0 ransaction ID: 34725423
American College of Radiology Association Political Action Committee          Full Name (Last, First, Middle Initial)       Image: Content of the second	M M / D D / Y Y Y Y 0 5 0 7 2 0 1 0 ransaction ID: 34725423
A. Dr. Kathleen L. Schneekloth C Mailing Address 2005 S Pendar Lane City State Zip Code T	M M / D D / Y Y Y Y 0 5 0 7 2 0 1 0 ransaction ID: 34725423
City State Zip Code Ti	0 5 0 7 2 0 1 0 ransaction ID: 34725423
FEC ID number of contributing	Amount of Each Receipt this Period 357.14
Name of Employer     Occupation       Medical X-Ray Center, P.C.     Diagnostic Radiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary       General         Other (specify) ▼       357.14	
Full Name (Last, First, Middle Initial)     Image: Constraint of the second secon	Date of Receipt
Mailing Address 1004 E Tomar Rd	M M / D D / Y Y Y Y 05 07 2010
	ransaction ID: 34725426
	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	357.14
Name of Employer     Occupation       Medical X-Ray Center     Diagnostic Radiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary     General       Other (specify) ▼     357.14	
Full Name (Last, First, Middle Initial)     E.       Dr. Terry Yeager     E	Date of Receipt
Mailing Address 2800 S Old Orchard Cir	M M / D D / Y Y Y Y 05 07 2010
	ransaction ID: 34725427
EEC ID number of contribution	Amount of Each Receipt this Period
federal political committee.	357.14
Name of Employer     Occupation       Medical X-Ray Center, P.C.     Diagnostic Radiologist	
Receipt For: Aggregate Year-to-Date	
Primary   General     Other (specify)   The second seco	
SUBTOTAL of Receipts This Page (optional)	1071.42
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 26 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may not be sold or used by any person ng the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology A	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Khalil Yousef		Date of Receipt
Mailing Address 5120 S Twinleaf I	Dr	M         M         /         D         D         /         Y
City	State Zip Code	Transaction ID: 34725428
Sioux Falls FEC ID number of contributing federal political committee.	SD 57108-2843	Amount of Each Receipt this Period 357.14
Name of Employer Medical X-Ray Center, P.C.	Occupation	
Receipt For: Primary General Other (specify)	Diagnostic Radiologist       Aggregate Year-to-Date       357.14	1
Full Name (Last, First, Middle Initial) Dr. William Rosner		Date of Receipt
Mailing Address 290 Ames Cir		05 / D D / Y Y Y Y 10 / 2010
City Huntingdon Valley	State Zip Code PA 19006-7976	Transaction ID: 34725819
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer South Jersey Radiology As- sociates, P.A Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	1
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2 Windsor Dr		05 / 10 / Y Y Y Y 02 10
City Voorhees	State Zip Code NJ 08043-3721	Transaction ID: 34725820 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer South Jersey Radiology As- sociates_	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page (option	nal)	1357.14
TOTAL This Period (last page this line nu	umber only)	

SCHEDULE A (FEC Form	<b>3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 27 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
or for commercial purposes, other than us	and Statements may not be sold or used by any persor ing the name and address of any political committee to s	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology A	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Edward Petrella		Date of Receipt
Mailing Address 3 Sheldon Pl		05 / 10 / Y Y Y Y 05 / 10
City Moorestown	State Zip Code NJ 08057-2114	Transaction ID: 34725821
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer South Jersey Radiology As- sociates, P.A	Occupation Diagnostic Radiologist	<b>-</b>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  500.00	
Full Name (Last, First, Middle Initial) Dr. Diane Icenogle-Leuschen Mailing Address 105 Palo Alto		Date of Receipt
	State Zip Code	05 12 2010
City Boerne	State Zip Code TX 78006-5999	Transaction ID: 34739472 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Audie L. Murphy Veterans Administratio	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Ronald Baxter		Date of Receipt
Mailing Address Radiology Assoc 716 Quincy St	iates	M = M         /         D = D         /         Y = Y = Y         Y           0 5         1 2         2 0 1 0
City Depid City	State Zip Code	Transaction ID: 34922652
Rapid City FEC ID number of contributing federal political committee.	SD 57701-3632	Amount of Each Receipt this Period
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optic	onal)	1350.00
	umber only)	1350.00

SCHEDULE A (FEC Form	<b>n 3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 28 / 160         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17
or for commercial purposes, other than	orts and Statements may not be sold or used by any person using the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiolog	y Association Political Action Committee	
Full Name (Last, First, Middle Initial Dr. Rebecca Belsaas		Date of Receipt
Mailing Address 5980 Wildwoo	d Dr	M M / D D / Y Y Y Y 05 / 12 2010
City Desid City	State Zip Code	Transaction ID: 34922653
Rapid City FEC ID number of contributing federal political committee.	SD 57702-8818	Amount of Each Receipt this Period 600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial Dr. Timothy Frost Mailing Address 7660 Elkhart F		Date of Receipt
		05 12 2010
City Rapid City	State Zip Code SD 57702-4793	Transaction ID: 34922654
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial Dr. Jon Stenberg	)	Date of Receipt
Mailing Address 403 N Berry P	ine Road	M M / D D / Y Y Y Y 05 12 2010
City	State Zip Code	Transaction ID: 34922655
Rapid City FEC ID number of contributing federal political committee.	SD 57702-1856	Amount of Each Receipt this Period 600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (o	ptional)	1800.00
TOTAL This Period (last page this line	e number only)	

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 29 / 160         (check only one)       11a         X       11a         13       14         15       16
Any ir or for	formation copied from such Reports and S commercial purposes, other than using the	Statements may e name and add	v not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	ME OF COMMITTEE (In Full) nerican College of Radiology Associ	iation Politic	al Action Committee	
	ll Name (Last, First, Middle Initial) . Brian Baxter			Date of Receipt
Ma	ailing Address 9151 Clarkson Rd			M         M         /         D         D         Y
Cit		State	Zip Code	Transaction ID: 34922656
<u>R</u>	apid City	SD	57702-9193	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		600.00
Na Ra	me of Employer adiology Associates	Occupation Diagnost	n ic Radiologist	
Re	ceipt For:	Aggregate	Year-to-Date 🔻	
_	Primary   General     Other (specify)	0 0	600.00	]
	ll Name (Last, First, Middle Initial) . Gregory Saffell			Date of Receipt
Ma	ailing Address 3981 Forest Park Cir			M M M         /         D D         /         Y Y         Y Y         Y <th< td=""></th<>
Cit		State	Zip Code	Transaction ID: 34922657
<u>R</u>	apid City	SD	57702-6927	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		600.00
Na Ra	me of Employer adiology Associates	Occupation Diagnost	n ic Radiologist	
Re	ceipt For:	Aggregate	Year-to-Date 🔻	
_	Primary General Other (specify) ▼	0 0	600.00	]
	ll Name (Last, First, Middle Initial) . Leo Flynn			Date of Receipt
Ma	ailing Address 5625 Blue Stem Ct			M         M         /         D         D         /         Y
Cit	•	State	Zip Code	Transaction ID: 34922658
<u>R</u>	apid City	SD	57702-8990	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		600.00
	me of Employer niv of OK Hith Sci	Occupation Diagnost	n ic Radiologist	
Re	eceipt For:	Aggregate	Year-to-Date 🔻	
_	Primary   General     Other (specify)	0.0	600.00	]
SUB	TOTAL of Receipts This Page (optional)			1800.00
	AL This Period (last page this line number		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 30 / 160         (check only one)
	Any information copied from such Reports and a or for commercial purposes, other than using th	Statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. William Zavitz			Date of Receipt
	Mailing Address 3980 Corral Dr			M M         /         D D         /         Y
	City	State	Zip Code	Transaction ID: 34922659
	Rapid City	SD	57702-9283	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer Radiology Associates, LLC	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	600.00	
- B.	Full Name (Last, First, Middle Initial) Dr. Thomas Habbe			Date of Receipt
	Mailing Address 13891Clydesdale Rd			M · M         /         D · D         /         Y         Y · Y         <
	City	State	Zip Code	Transaction ID: 34922660
	Rapid City	SD	57702-7339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer Radiology Associates	Occupation Diagnost	<sup>n</sup> ic Radiologist	
			e Year-to-Date 🔻	_
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0.0	600.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Janet Shaefer			Date of Receipt
	Mailing Address PO Box 1574			05 / D D / Y Y Y Y 12 2010
	City	State	Zip Code	Transaction ID: 34922661
	Rapid City	SD	57709-1574	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer Radiology Associates	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	600.00	
ſ	SUBTOTAL of Receipts This Page (optional) .			1800.00
	TOTAL This Period (last page this line numbe	er only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 31 / 160           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political committ	person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Dennis Nesbit		Date of Receipt
	Mailing Address 2716 Country Club Dr		05 / D D / Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34922687
	Rapid City	SD 57702-5215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	600.00	
- B.	Full Name (Last, First, Middle Initial) Dr. Robert Durst, JR		Date of Receipt
	Mailing Address 5353 Berglund Rd		05 / D D / Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34922688
	Rapid City	SD 57701-8914	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	600.00	
с.	Full Name (Last, First, Middle Initial) Dr. Harold Pimenta		Date of Receipt
	Mailing Address 4103 Sturgeon Court		05 / D D / Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34925229
	<u>San Diego</u>	CA 92130-2145	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	<ul><li>Primary General</li><li>Other (specify) ▼</li></ul>	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)		1450.00
	TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 32 / 160         (check only one)       X         X       11a       11b       11c       12         13       14       15       16       17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Political Action Committee	
_ر_ A.	Full Name (Last, First, Middle Initial) Dr. Kristina Kjeldsberg		Date of Receipt
	Mailing Address La Jolla Radiology Me 10150 Sorrento Valley	M - M         /         D - D         /         Y         Y - Y         <	
	City	State Zip Code	Transaction ID: 34925230
	San Diego	CA 92121-1614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer La Jolla Radiology	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) <b>▼</b>	250.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Rahul Patel		Date of Receipt
	Mailing Address 634 Pacific View Dr		M         M         /         D         D         Y
	City	State Zip Code	Transaction ID: 34925231
	San Diego	CA 92109-1768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	250.00	
 C.	Full Name (Last, First, Middle Initial) Dr. Michael K.C. Kan		Date of Receipt
	Mailing Address P.O. Box 22793		M         M         /         D         D         Y
	City	State Zip Code	Transaction ID: 34925232
	San Diego	CA 92192-2793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	250.00	
	SUBTOTAL of Receipts This Page (optional)	۱ 	750.00
	<b>FOTAL</b> This Period (last page this line number	<b>·</b>	

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 33 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17		
Any information copied from such Repo or for commercial purposes, other than	rts and Statements may not be sold or used by any person using the name and address of any political committee to	n for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) American College of Radiology	Association Political Action Committee			
Full Name (Last, First, Middle Initial) Dr. Vincent Ricchiuti	Full Name (Last, First, Middle Initial) Dr. Vincent Ricchiuti			
	Mailing Address La Jolla Rad Med Grp Dia Inc 10150 Sorrento Valley Rd Ste 320			
City	State Zip Code	Transaction ID: 34925234		
San Diego FEC ID number of contributing federal political committee.	CA 92121-1614	Amount of Each Receipt this Period		
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. E William Akins		Date of Receipt		
	Mailing Address 3971 Gulfshore Blvd Apt P/H 304			
City	State Zip Code	Transaction ID: 34925279		
Naples FEC ID number of contributing federal political committee.	FL 34103-2100	Amount of Each Receipt this Period		
Name of Employer Naples Radiologists	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. H Jay Zeskind		Date of Receipt		
Mailing Address 4870 Park Hill	Dr	05 12 2010		
City	State Zip Code	Transaction ID: 34925280		
West Bloomfield FEC ID number of contributing federal political committee.	MI 48323-3574	Amount of Each Receipt this Period 500.00		
Name of Employer Diagnostic Radiology Cons- ultants, PC	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (or	otional)	1000.00		
	e 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 34 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
or for commercial purposes, other than using the	Statements may not be sold or used by any perso ne name and address of any political committee to	n for the purpose of soliciting contributions
American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial)           Dr. Phan Huynh		Date of Receipt
Mailing Address 4522 Pin Oak Ln		05 12 Y Y Y Y 005 12 2010
City	State Zip Code	Transaction ID: 34925283
Bellaire	TX 77401-2612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Singleton Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)           Dr. Michael Linver		Date of Receipt
Mailing Address 6504 Avenida La Cuo	chilla NW	05 12 Y Y Y 05 12 2010
City	State Zip Code	Transaction ID: 34925427
Albuquerque	NM 87107-5637	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer X-Ray Associates of N.M., P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) Dr. Charles Liu		Date of Receipt
Mailing Address La Jolla Radiology M 10150 Sorrento Valle	edical Group y Rd Ste 320	M         M         /         D         D         /         Y
City	State Zip Code	Transaction ID: 34925429
San Diego	CA 92121-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical	Occupation Diagnostic Radiologist	
<u>Group</u> Receipt For:	Aggregate Year-to-Date V	-
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 35 / 160           (check only one)
or for commercial purposes, other than using	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions
American College of Radiology As	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Philip Hoang		Date of Receipt
Mailing Address 5043 Sterling Grov	05 / D D / Y Y Y Y 05 12 2010	
City	State Zip Code	Transaction ID: 34925430
San Diego	CA 92130-2882	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical	Occupation Diagnostic Radiologist	
Group Receipt For:	Aggregate Year-to-Date V	1
Primary     General       Other (specify)     ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Paul Rickards		Date of Receipt
Mailing Address LJR Medical Group 10150 Sorrento Va	Iley Rd Ste 320	M M         /         D D         Y         Y Y         Y </th
City Cor Diana	State Zip Code	Transaction ID: 34925434
San Diego FEC ID number of contributing federal political committee.	CA 92121-1614	Amount of Each Receipt this Period
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary       General         Other (specify)       ▼	250.00	]
Full Name (Last, First, Middle Initial) Dr. John Barr	I	Date of Receipt
Mailing Address LJR NeuroInterven 10150 Sorrento Va	Iley RD STE 320	M         M         /         D         D         /         Y
City San Diago	State Zip Code	Transaction ID: 34925435
San Diego FEC ID number of contributing federal political committee.	CA 92121-1614	Amount of Each Receipt this Period 250.00
Name of Employer La Jolla Radiology Medical	Occupation Diagnostic Radiologist	
Group Receipt For:	Aggregate Year-to-Date V	-1
Primary General Other (specify) ▼	250.00	]
SUBTOTAL of Receipts This Page (option	al)	750.00
	nber only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 36 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ			
A.	Full Name (Last, First, Middle Initial) Dr. Stephen Moreland, III			Date of Receipt
	Mailing Address 1510 Calle Vaquero			M - M         /         D - D         /         Y - Y - Y         Y
	City	State	Zip Code	Transaction ID: 34925436
	La Jolla FEC ID number of contributing federal political committee.	CA	92037-7181	Amount of Each Receipt this Period
	Name of Employer La Jolla Radiology Medical <u>Group</u> Receipt For:	, <b>,</b> , , , , , , , , , , , , , , , , ,	on tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
в.	Full Name (Last, First, Middle Initial) Dr. Jerome Pierce, III Mailing Address 12760 Sandy Crest Ct			Date of Receipt
	City	State	Zip Code	Transaction ID: 34925437
	San Diego FEC ID number of contributing federal political committee.	CA	92130-2795	Amount of Each Receipt this Period 250.00
	Name of Employer La Jolla Radiology Receipt For:	, I – Ŭ	tic Radiologist	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
С.	Full Name (Last, First, Middle Initial) Dr. William C. Harrison			Date of Receipt
	Mailing Address 4045 Foxtail Pl			0 5 1 2 2 0 1 0
	City	State	Zip Code	Transaction ID: 34925438
	Owensboro FEC ID number of contributing federal political committee.	KY C	42303-2277	Amount of Each Receipt this Period
	Name of Employer Radiology, PSC	, <b>,</b>	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00
	TOTAL This Period (last page this line number	only)		
SCHEDULE A (FEC Form 3X		FOR LINE NUMBER: PAGE 37 / 160 (check only one)		
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to s	for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Political Action Committee			
Full Name (Last, First, Middle Initial) Dr. Ross Christensen		Date of Receipt		
Mailing Address La Jolla Radiology M 10150 Sorrento Vall		0 5 / D D / Y Y Y Y 0 5 / 1 2 2 0 1 0		
City	State Zip Code	Transaction ID: 34925446		
San Diego	CA 92121-1614	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	-		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	250.00			
Full Name (Last, First, Middle Initial) Dr. Michael Noon		Date of Receipt		
Mailing Address 1802 Viking Way		05 / 12 / Y Y Y Y 025 / 12		
City	State Zip Code	Transaction ID: 34925447		
La Jolla	CA 92037-3354	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist			
Receipt For:	Aggregate Year-to-Date 🔻			
Primary     General       Other (specify)     ▼	250.00			
Full Name (Last, First, Middle Initial) Dr. Peter McCreight		Date of Receipt		
Mailing Address 6366 Cardeno Dr		M         M         /         D         D         /         Y		
City	State Zip Code	Transaction ID: 34925448		
La Jolla	CA 92037-6928	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	]		
Receipt For:	Aggregate Year-to-Date ▼			
Primary     General       Other (specify)     ▼	250.00			
SUBTOTAL of Receipts This Page (optional	)	750.00		
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line number	·	750.00		

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 38 / 160
	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Assoc	ciation Politic	al Action Committee	
۹.	Full Name (Last, First, Middle Initial) Dr. Joseph Wroblicka	Date of Receipt		
	Mailing Address 177 D Ave			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34925454
	Coronado	CA	92118-1316	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer La Jolla Radiology Medical	Occupatio	n ic Radiologist	_
	<u>Group</u> Receipt For:		e Year-to-Date V	
	Primary General	Aggregate		-
	Other (specify)	0 0	250.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. David Vu			Date of Receipt
	Mailing Address 302 Washington St Ap	05 / Y Y Y Y 02 01 0		
	City	State	Zip Code	Transaction ID: 34925455
	San Diego	CA	92103-2110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer La Jolla Radiology Medical	Occupatio	n ic Radiologist	
	<u>Group</u> Receipt For:	_ · · · ·	e Year-to-Date V	—
	Primary General Other (specify) ▼		250.00	]
-	Full Name (Last, First, Middle Initial) Dr. William Ladd			Date of Receipt
	Mailing Address 3366 Valemont St			05 12 2010
	City	State	Zip Code	Transaction ID: 34925456
	San Diego	CA	92106-2431	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer La Jolla Radiology Medical	Occupatio	n ic Radiologist	
	<u>Group</u> Receipt For:		e Year-to-Date V	
	Primary General Other (specify) ▼		250.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		750.00
┝			•	
	TOTAL This Period (last page this line number	r only)		

Ś	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 39 / 160		
			for each category of the	(check only one)		
1			Detailed Summary Page			
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     1 <sup>-</sup> on for the purpose of soliciting contributions o solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)					
	American College of Radiology Associ	iation Politic	cal Action Committee			
	Full Name (Last, First, Middle Initial) Dr. Walter Kuhnen	Date of Receipt				
	Mailing Address 219 Quaker Hill Rd			05 / D D / Y Y Y Y 12 / 2010		
	City	State	Zip Code	Transaction ID: 34925458		
	Warren	PA	16365-1462	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		250.00		
	Name of Employer Warren Radiology Associat-	Occupatio	on tic Radiologist			
	es Receipt For:	1 I	e Year-to-Date V	-1		
	Primary General	Ayyreyau		-		
	Other (specify)	0 0	250.00			
	Full Name (Last, First, Middle Initial) Dr. David Naugle			Date of Receipt		
	Mailing Address 822 Scenic Terrace PI			M M / D D / Y Y Y Y 05 12 2010		
	City	State	Zip Code	Transaction ID: 34925459		
	Chula Vista	CA	91914-2621	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer La Jolla Radiology Medical	Occupatio	on tic Radiologist			
	<u>Group</u> Receipt For:		e Year-to-Date V			
	Primary General Other (specify) ▼		250.00	]		
_	Full Name (Last, First, Middle Initial) Dr. Roger Cronk			Date of Receipt		
•	Mailing Address 1505 Eagle Ridge Rd I	NE		05 15 2010		
	City	State	Zip Code	Transaction ID: 34925471		
	Albuquerque	NM	87122-1156	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer X-Ray Associates of NM,	Occupatio	on tic Radiologist			
	PC Receipt For:	1	e Year-to-Date V			
	Primary General Other (specify) ▼		250.00	]		
Γ	SUBTOTAL of Receipts This Page (optional)			750.00		
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;	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 160 (check only one)
l	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Assoc	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Kevin Cregan	Date of Receipt		
	Mailing Address Wayne Radiologists 2700 Medical Office Pl	lace		05 / D D / Y Y Y Y 15 2010
	City	State	Zip Code	Transaction ID: 34925476
	Goldsboro	NC	27534-9460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Wayne Radiologists	Occupatio Diagnost	n tic Radiologist	-
	Receipt For:	1 · · · · ·	e Year-to-Date V	
	Primary General Other (specify) ▼		250.00	]
- B.	Full Name (Last, First, Middle Initial) Dr. James Sloves			Date of Receipt
	Mailing Address 4870 W Pinewild Rd			05 / Y Y Y Y 05 / 15 / 2010
	City	State	Zip Code	Transaction ID: 34925489
	Reno	NV	89511-2779	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Holy Cross Hospital	Occupatio	<sup>n</sup> tic Radiologist	
	Receipt For:	1 · · · ·	e Year-to-Date	_
	Primary General	7 iggi ogu	500.00	1
	Other (specify)	0 0		]
с	Full Name (Last, First, Middle Initial) Dr. David Harry			Date of Receipt
	Mailing Address 136 Highview Rd			M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34925490
	Stephenson	VA	22656-2105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Winchester Medical Center	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul><li>Primary General</li><li>Other (specify) ▼</li></ul>	0 0	750.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	1		1000.00
ŀ	TOTAL This Period (last page this line number			
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		1		FOR LINE NUMBER: PAGE 41 / 160				
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)				
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
-				13 14 15 16 17				
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions osolicit contributions from such committee.						
h								
	American College of Radiology Associ	iation Politica	al Action Committee					
∠ A.	Full Name (Last, First, Middle Initial) Dr. Shane Kraske							
<b>~</b> .	Mailing Address 37 Columbine Ct	Date of Receipt 0 5 1 5 2 0 1 0						
	City	State	Zip Code	Transaction ID: 34925491				
	Iowa City	IA	52246-8716	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		250.00				
	Name of Employer Radiologic Medical Servic-	Occupation		_				
	es, Coralvill	1 · · · · ·	ic Radiologist					
	Receipt For: Primary General	Aggregate	Year-to-Date	_				
	Other (specify)		500.00					
_		0 0						
- В.	Full Name (Last, First, Middle Initial) Dr. Randall S. Winn			Date of Receipt				
	Mailing Address Reading Hospital & Me PO Box 16052	0 5 1 5 2 0 1 0						
	City	State	Zip Code	Transaction ID: 34925492				
	Reading	PA	19612-6052	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer West Reading Radiology As-	Occupation		_				
	SOC	, I	ic Radiologist					
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	-				
	Other (specify)	0 0	500.00					
-	Full Name (Last, First, Middle Initial)	<u>I</u>						
С.	Dr. William Fife Mailing Address 256 NW Pacific Grove	Dr		Date of Receipt				
				05 15 2010				
	City	State	Zip Code	Transaction ID: 34925493				
	Beaverton	OR	97006-8352	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer LAC/USC Hospital	Occupation	n ic Radiologist					
	Receipt For:	1 1 2	Year-to-Date					
	Primary General							
	Other (specify)	0 0	500.00					
ſ	SUBTOTAL of Receipts This Page (optional)			750.00				
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	TOTAL This Period (last page this line number	only)	I					

	SCHEDULE A (FEC Form 3X)	Use separate schedule(s	) FOR LINE NUMBER: PAGE 42 / 160 (check only one)					
	TEMIZED RECEIPTS	for each category of the	$\mathbf{X}$ 11a $1$ 11b $1$ 11c $1$ 12					
		Detailed Summary Page						
	Any information copied from such Reports and S or for commercial purposes, other than using the	person for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)							
	American College of Radiology Associ	American College of Radiology Association Political Action Committee						
Α.	Full Name (Last, First, Middle Initial) Dr. Raymond Tu	Date of Receipt						
	Mailing Address 1539 27th St NW		05 / D D / Y Y Y Y 2010					
	City	State Zip Code	Transaction ID: 34925496					
	Washington	DC 20007-3030	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	250.00					
	Name of Employer Progressive Radiology	Occupation Diagnostic Radiologist						
	Receipt For:	Aggregate Year-to-Date V						
	Primary General							
_	Other (specify)	500.00						
в.	Full Name (Last, First, Middle Initial) Dr. Bill Warren		Date of Receipt					
	Mailing Address UWMC Box 357115		05 / 15 / Y Y Y Y 05 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
	City	State Zip Code	Transaction ID: 34925497					
	Seattle	WA 98195-7115	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	250.00					
	Name of Employer University of Washington	Occupation Diagnostic Radiologist						
	Receipt For:	Aggregate Year-to-Date V						
	Primary General							
	Other (specify) <b>v</b>	500.00						
с. –	Full Name (Last, First, Middle Initial) Dr. John Rogers		Date of Receipt					
	Mailing Address 802 West Gap Creek F	Road	0 5 / <sup>D</sup> D D / <u>Y Y Y Y</u> Y 0 5 1 5 2 0 1 0					
	City	State Zip Code	Transaction ID: 34925822					
	Greer	SC 29651-5065	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	42.00					
	Name of Employer Greenville Radiology	Occupation Diagnostic Radiologist						
	Receipt For:	Aggregate Year-to-Date V						
	Primary General Other (specify) ▼	210.00						
Г			<b>540.00</b>					
	SUBTOTAL of Receipts This Page (optional)		▶ <u>542.00</u>					
	TOTAL This Period (last page this line number	only)	•					

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 43 / 160           (check only one)         11a         11b         11c         12           X         11a         14         15         16         17						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r 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)	ssociation Political Action Committee							
		1						
Full Name (Last, First, Middle Initial) Dr. Eric Tocci	Full Name (Last, First, Middle Initial) Dr. Eric Tocci							
Mailing Address 437 Triton Road	Mailing Address 437 Triton Road							
City	State Zip Code	Transaction ID: 34925823						
Ormond Beach	FL 32176-5459	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	50.00						
Name of Employer Radiology Associates of	Occupation	1						
Daytona Beach	Diagnostic Radiologist	4						
Receipt For:	Aggregate Year-to-Date ▼							
Other (specify) ▼	250.00							
Full Name (Last, First, Middle Initial) Dr. Scott Klioze		Date of Receipt						
Mailing Address 7 Cypress Hollow	Mailing Address 7 Cypress Hollow Ln							
City	State Zip Code	Transaction ID: 34925824						
Ormond Beach	FL 32174-3047	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	100.00						
Name of Employer Radiology Associates of	Occupation Diagnostic Radiologist	-						
Daytona Beach Receipt For:	Aggregate Year-to-Date V	-						
Primary General Other (specify) ▼	500.00							
Full Name (Last, First, Middle Initial) Dr. Robert Newman		Date of Receipt						
Dr. Robert Newman Mailing Address 913 Southview Pl	NE							
City	State Zip Code	Transaction ID: 34925825						
Lenoir	NC 28645-3755	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	50.00						
Name of Employer Lenoir Radiology	Name of Employer         Occupation           Lenoir Radiology         Diagnostic Radiologist							
Receipt For:	Aggregate Year-to-Date ▼	1						
Primary     General       Other (specify)     ▼	250.00							
SUBTOTAL of Receipts This Page (option	nal)	200.00						
	mber only)							

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	SCHEDULE A (FEC Form 3X)	Us	e separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 160 (check only one)
	ITEMIZED RECEIPTS	for	each category of the	
		De	tailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
[	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	11 3			Solicit Contributions from Such Committee.
	American College of Radiology Associa	ation Political Ac	tion Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Andrew Beloni			Date of Receipt
	Mailing Address 5624 Laurium Rd			05 / 15 / Y Y Y Y 2010
	City		lip Code	Transaction ID: 34925826
	Charlotte NC		28226-5610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer	Occupation		-
	Charlotte Radiology	Diagnostic Ra	diologist	
	Receipt For:	Aggregate Year-	to-Date V	
	Primary General	33 - 3	<u>i i i i i i</u>	1
	Other (specify)		225.00	
в.	Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien			Date of Receipt
	Mailing Address St Johns Macomb Hos 11800 E 12 Mile Rd	pital		05 / D D / Y Y Y Y 05 / 15 / 2010
	City	State Z	lip Code	Transaction ID: 34925829
	Warren	MI 4	8093-3494	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer Diagnostic Radiology Cons- ultants, PC	Occupation Diagnostic Ra	diologist	
	Receipt For:	Aggregate Year-	•	_
	Primary General	Aggregate rear	<u> </u>	1
	Other (specify)	0 0 0 0	210.00	
- С.	Full Name (Last, First, Middle Initial) Dr. Terry Martin			Date of Receipt
	Mailing Address Rad Assoc of Biirming 2090 Columbiana Rd S	nam PC Ste 4400		05 / 15 / Y Y Y Y 2010
	City		lip Code	Transaction ID: 34925831
	<u>Birmingham</u>	AL 3	35216-2152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Rad Assoc of Biirmingham	Occupation Diagnostic Ra	diologist	1
	PC Receipt For:	Aggregate Year-	0	-1
	Primary General	Aygregale rear-		1
	Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional)		<b>.</b>	190.00
ŀ	<b>TOTAL</b> This Period (last page this line number of		-	
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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 160
	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	X         III         IIII         IIII         IIII         IIII         IIII         IIII         IIII         IIII         IIIII         IIIIII         IIIIIII         IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation Politic	cal Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Kent Lancaster			Date of Receipt
	Mailing Address 3141 Sundance Path			0 5 / 1 5 2 0 1 0
	City	State	Zip Code	Transaction ID: 34925832
	Stevensville	MI	49127-9376	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Radiology Associates of	Occupatio		
	Berrie		tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	210.00	
В.	Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen			Date of Receipt
	Mailing Address 6612 Cliffbrook Dr			M M / D D / Y Y Y Y Y 05 15 2010
	City	State	Zip Code	Transaction ID: 34925834
	Dallas	TX	75254-8613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.34
	Name of Employer Southwest Imaging & Inter- ven specialis	Occupatio Diagnost	n tic Radiologist	
	Receipt For:		e Year-to-Date 🔻	
	Other (specify) ▼	0 0	1041.70	]
C.	Full Name (Last, First, Middle Initial) Dr. James Courtney			Date of Receipt
	Mailing Address 27 Hillwood Rd			M M / D D / Y Y Y Y 05 15 2010
	City	State	Zip Code	Transaction ID: 34925837
	Mobile	AL	36608-2311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Radiology Associates of	Occupatio	n tic Radiologist	
	Mobile Receipt For:		e Year-to-Date V	-
	Primary General Other (specify) ▼		259.25	1
	-			
	SUBTOTAL of Receipts This Page (optional)		••••••	292.34
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 46 / 160           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	son for the purpose of soliciting contributions		
	American College of Radiology Assoc	tiation Politica	al Action Committee	
٩.	Full Name (Last, First, Middle Initial) Dr. Howard Bear	Date of Receipt		
	Mailing Address 4931 Pearlman Way			05 / 15 / 2010
	City	State	Zip Code	Transaction ID: 34925838
	San Diego	CA	92130-2789	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer San Diego Imaging Medical	Occupation		
	Group	- I	ic Radiologist	
	Receipt For: Primary General	Aggregate	Year-to-Date	_
	Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Dr. Demetrius Morros			Date of Receipt
	Mailing Address 7418 Ridgecrest Cour	05 <sup>/</sup> 15 <sup>/</sup> 2010		
	City	State	Zip Code	Transaction ID: 34925839
	Birmingham	AL	35242-0525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Birmingham Radiological Group P.C.	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	416.70	
-	Full Name (Last, First, Middle Initial) Dr. Jugesh Cheema			Date of Receipt
	Mailing Address 2466 Oak Bend PI			0 5 1 5 2 0 1 0
	City	State	Zip Code	Transaction ID: 34925840
	Newburgh	IN	47630-8053	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Medical Center of Delaware	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		300.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		193.34
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	TOTAL This Period (last page this line number	r only)		

Ar or	for commercial purposes, other than using th NAME OF COMMITTEE (In Full) American College of Radiology Assoc Full Name (Last, First, Middle Initial) Dr. Paul Lampert Mailing Address 2240 S. Elks Lane	e name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	American College of Radiology Assoc Full Name (Last, First, Middle Initial) Dr. Paul Lampert Mailing Address 2240 S. Elks Lane	iation Political Action Committ	ee
	Dr. Paul Lampert Mailing Address 2240 S. Elks Lane		
			Date of Receipt
	Unit 55		0 5 / D D / Y Y Y 2 0 1 0
	City Yuma	State Zip Code AZ 85364-6284	Transaction ID: 34925844 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer MDIG	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V	25.00
	Full Name (Last, First, Middle Initial) Dr. Raja Cheruvu Mailing Address 165 Via Foresta Ln	1	Date of Receipt
			05 15 2010
	City Williamsville	State Zip Code NY 14221-1984	Transaction ID: 34925846           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Windsong Radiology Group	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	50.00
	Full Name (Last, First, Middle Initial) Dr. John Renz		Date of Receipt
	Mailing Address Mobile Infirmary Medi PO Box 2144	cal Center	0 5 1 5 Y Y Y Y Y 0 5 1 5 2 0 1 0
	City Mobile	State Zip Code AL 36652-2144	Transaction ID: 34925847
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
	Name of Employer Mobile Infirmary Medical Center	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) $\bigtriangledown$	Aggregate Year-to-Date	50.00
s	UBTOTAL of Receipts This Page (optional) .	1	225.00

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S	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS					DR LINE NUMBER: PAGE 48 / 160
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				etailed Summary Page	ΙĽ	K 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and S r for commercial purposes, other than using the					the purpose of soliciting contributions
Γ	NAME OF COMMITTEE (In Full)					
	American College of Radiology Associ	ation Politio	cal Ad	ction Committee		
•	Full Name (Last, First, Middle Initial) Dr. Raymond A. Armstrong					Date of Receipt
	Mailing Address Radiology of Huntsville 2006 Franklin St SE St				05 <sup>//</sup> 15 <sup>/</sup> 2010	
	City	State		Zip Code		Transaction ID: 34925848
	Huntsville	AL		35801-4537		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C				100.00
	Name of Employer Baptist Medical Ctr-Montc-	Occupatio				
	lair			adiologist		
	Receipt For: Primary General	Aggregat	e yeai	r-to-Date ▼		
	Other (specify)	0 0		500.00		
. —	Full Name (Last, First, Middle Initial) Dr. H E. Longmaid, III					Date of Receipt
•	Mailing Address 52 Harwich Rd					0 5 1 5 2 0 1 0
	City	ity State				Transaction ID: 34925849
	Chestnut Hill	MA		02467-3023		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1			41.67
	Name of Employer Deaconess Hospital	Occupatio				
	-			adiologist		
	Receipt For: Primary General	Aggregat	e Yeai	r-to-Date ▼		
	Other (specify) ▼	0 0		208.35		
	Full Name (Last, First, Middle Initial) Dr. William Deeter, III					Date of Receipt
•	Mailing Address 14 Ryedale Ct					05 15 2010
	City	State		Zip Code		Transaction ID: 34925854
	Greenville	SC		29615-6037		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C				41.67
	Name of Employer Greenville Radiology	Occupatio	on			
	Receipt For:	Aggregat	e Yea	r-to-Date 🔻		
	Primary General		-		1	
	Other (specify)			208.35		
	SUBTOTAL of Receipts This Page (optional)					183.34
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-	TOTAL This Period (last page this line number	only)			•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate scho for each category Detailed Summary	
F	or for commercial purposes, other than using the	atements may not be sold or used I name and address of any political of	by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
	American College of Radiology Associ	ation Political Action Committ	ee
A.	Full Name (Last, First, Middle Initial) Dr. Robert Mittl, JR		Date of Receipt
	Mailing Address 4733 Coburn Court		05 / D D / Y Y Y Y 05 15 2010
	City	State Zip Code	Transaction ID: 34925855
	Charlotte	NC 28277-2593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date V	
	Primary     General       Other (specify)     ▼	3	36.00
- В.	Full Name (Last, First, Middle Initial) Dr. James Hiken		Date of Receipt
	Mailing Address 7109 Cove Pointe PI		05 / D D / Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34925856
	Prospect	KY 40059-9680	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer Diag. Imaging Alliance of Louisville	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	2	10.00
- C.	Full Name (Last, First, Middle Initial) Dr. Kevin Smith		Date of Receipt
	Mailing Address Regional Diagnostic Ra 1406 6th Ave N	adiology	05 / 15 / Y Y Y Y 05 / 15
	City	State Zip Code	Transaction ID: 34925861
	Saint Cloud FEC ID number of contributing	<u>MN 56303-1900</u>	Amount of Each Receipt this Period
	federal political committee.		208.34
	Name of Employer Regional Diagnostic Radio-	Occupation Diagnostic Radiologist	
	logy Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼		41.70
ſ	SUBTOTAL of Receipts This Page (optional)		292.34
ľ	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 50 / 160         (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	v not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Ass			
Full Name (Last, First, Middle Initial)     Dr. Raul de la Vega, III			Date of Receipt
Mailing Address 2936 Grampian Dr			05 15 2010
City	State	Zip Code	Transaction ID: 34925862
Gastonia	NC	28054-6402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer Shelby Radiological Assoc-	Occupation Diagnost	n ic Radiologist	
iates Receipt For:		Year-to-Date V	
Primary     General       Other (specify) ▼		225.00	
Full Name (Last, First, Middle Initial) Dr. Kavita Patel			Date of Receipt
Mailing Address 35 Annfield Ct			M · M         /         D · D         /         Y · Y · Y · Y         Y           0 5         /         2 0         /         2 0 1 0
City	State	Zip Code	Transaction ID: 34925876
Staten Island	NY	10304-1301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date 🔻	
<ul><li>Primary General</li><li>Other (specify) ▼</li></ul>	0 0	270.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason			Date of Receipt
Mailing Address 506 Julie Ct			05 / D D / Y Y Y Y 20 20 10
City	State	Zip Code	Transaction ID: 34925878
Wyckoff	NJ	07481-1101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date 🔻	_
Other (specify)		300.00	
SUBTOTAL of Receipts This Page (optional	)		105.00
TOTAL This Period (last page this line numb		•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 51 / 160           (check only one)         X           X         11a           113         14           15         16
An or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. David Panush			Date of Receipt
	Mailing Address 538 E 84th St Apt 4E	M M / D D / Y Y Y Y 05 20 2010		
	City	State	Zip Code	Transaction ID: 34925879
	New York FEC ID number of contributing federal political committee.	NY C	10028-7357	Amount of Each Receipt this Period 30.00
	·	Occupatio	n	_
	Name of Employer Hackensack Radiology Group		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Dr. Joel Rakow			Date of Receipt
	Mailing Address 505 Ivy Lane			05 20 2010
	City	State	Zip Code	Transaction ID: 34925880
	Wyckoff FEC ID number of contributing federal political committee.	NJ C	07481-1072	Amount of Each Receipt this Period 30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	<sup>n</sup> ic Radiologist	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 300.00	
	Full Name (Last, First, Middle Initial)			- Detect Develop
	Dr. Patrick Toth Mailing Address 201 E 80th St Apt 8F			Date of Receipt
	City	State	Zip Code	Transaction ID: 34925881
	New York	NY	10021-0515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
6	<b>UBTOTAL</b> of Receipts This Page (optional)	1		90.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fo	lse separate schedule(s) or each category of the betailed Summary Page	FOR LINE NUMBER:       PAGE 52 / 160         (check only one)       11a       11b       11c       12         X       11a       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	American College of Radiology Assoc	ciation Political A	ction Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. John DeMeritt	Date of Receipt		
	Mailing Address 18 Baldwin Rd	M M / D D / Y Y Y Y 05 20 2010		
	City		Zip Code	Transaction ID: 34925911
	Saddle River	NJ	07458-3203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupation Diagnostic R	adiologist	
	Receipt For:	Aggregate Yea	r-to-Date 🔻	_
	Other (specify) ▼		300.00	]
В.	Full Name (Last, First, Middle Initial) Dr. Rita S. Patel			Date of Receipt
	Mailing Address 3 Ware Rd			05 20 Y Y Y Y 05 20 2010
	City	State	Zip Code	Transaction ID: 34925912
	Upper Saddle River	NJ	07458-1919	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupation Diagnostic R		
	Receipt For:	Aggregate Yea	r-to-Date 🔻	_
	Other (specify)		300.00	]
C.	Full Name (Last, First, Middle Initial) Dr. Mitchell Miller	·		Date of Receipt
	Mailing Address 2 Constitution Ct Apt	1009		05 20 2010
	City		Zip Code	Transaction ID: 34925913
	Hoboken	NJ	07030-6730	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupation Diagnostic R	•	
	Receipt For:	Aggregate Yea	r-to-Date 🔻	_
	Other (specify) ▼		300.00	
	SUBTOTAL of Receipts This Page (optional)	•	······	90.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 53 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce		Date of Receipt
Mailing Address 509 48th Ave Apt 2	2A	M M / D D / Y Y Y Y 05 20 2010
City	State Zip Code	Transaction ID: 34925914
Long Island City FEC ID number of contributing federal political committee.	NY 11101-5604	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone Mailing Address 440 E 62nd St Apt	18F	Date of Receipt
City	State Zip Code	05202010 Transaction ID: 34925915
New York	NY 10065-8345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde		Date of Receipt
Mailing Address 7 Kinkaid Ave		M         M         /         D         /         Y
City	State Zip Code	Transaction ID: 34925916
<u>Closter</u> FEC ID number of contributing federal political committee.	NJ 07624-2908	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (option	al)	90.00
TOTAL This Period (last page this line nun	nber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 54 / 160           (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Adam Bogomol		Date of Receipt
Mailing Address 50 W 72nd St Apt	1509	05 20 Y Y Y Y 2010
City	State Zip Code	Transaction ID: 34925917
New York FEC ID number of contributing federal political committee.	NY 10023-4132	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date 300.00	1
Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR		Date of Receipt
Mailing Address Hackensack Unive 30 Prospect Ave	M M / D D / Y Y Y Y 05 20 2010	
City Hackensack	State Zip Code NJ 07601-1914	Transaction ID: 34925918
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	]
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert		Date of Receipt
Mailing Address 124 W 60th St Apt	t 45	05 20 Y Y Y Y 05 20 2010
City	State Zip Code	Transaction ID: 34925919
New York FEC ID number of contributing federal political committee.	NY 10023-7451	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	]
SUBTOTAL of Receipts This Page (option	nal)	90.00
	nber only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 55 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Steven Berrett		Date of Receipt
	Mailing Address 608 Corriente Ct		05 20 Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34925966
	<u>Camarillo</u>	CA 93010-1607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Pueblo Radiology Medical	Occupation Diagnostic Radiologist	
	Group Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	]
- B.	Full Name (Last, First, Middle Initial) Dr. M Black		Date of Receipt
	Mailing Address 4730 La Puma Ct		05 / 20 / Y Y Y 2010
	City	State Zip Code	Transaction ID: 34926208
	<u>Camarillo</u>	CA 93012-4055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Pueblo Radiology Medical Group	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	500.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Gary Blum	1	Date of Receipt
	Mailing Address Pueblo Radiology 2320 Bath St Ste 208		05 / 20 / Y Y Y 2010
	City	State Zip Code	Transaction ID: 34926209
	Santa Barbara	CA 93105-5322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Pueblo Radiology Medical	Occupation Diagnostic Radiologist	
	Group, Inc. Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	500.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	I	1500.00
ŀ	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 56 / 160           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         17				
	or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to such						
	American College of Radiology Associ	iation Politic	al Action Committee					
Α.	Full Name (Last, First, Middle Initial) Dr. John Bohannan			Date of Receipt				
	Mailing Address 2608 Vista Arroyo Dr			M M         /         D D         /         Y				
	City	State	Zip Code	Transaction ID: 34926210				
	Santa Rosa Valley	CA	93012-9339	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Pueblo Radiology Medical	Occupatio	n tic Radiologist	_				
	<u>Group</u> Receipt For:	1 · · · · ·	e Year-to-Date V	—				
	Primary General Other (specify) <b>▼</b>		500.00					
В.	Full Name (Last, First, Middle Initial) Dr. Ramona Clark			Date of Receipt				
	Mailing Address 1250 Mesa Rd			05 / D D / Y Y Y Y 20 2010				
	City	State	Zip Code	Transaction ID: 34926211				
	Santa Barbara	CA	93108-2454	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Pueblo Radiology Med Grou- p, Inc.	Occupatio Diagnost	<sup>n</sup> lic Radiologist					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary     General       Other (specify) ▼	0 0	500.00					
С.	Full Name (Last, First, Middle Initial) Dr. James Day, JR			Date of Receipt				
	Mailing Address 4430 Sweet Briar St			05 20 Y Y Y Y 2010				
	City	State	Zip Code	Transaction ID: 34926212				
	Ventura	CA	93003-1928	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer Pueblo Radiology Medical Group	Occupatio Diagnost	<sup>n</sup> lic Radiologist					
	Receipt For:	1 · · · · ·	e Year-to-Date 🔻					
	Other (specify) ▼		500.00					
	SUBTOTAL of Receipts This Page (optional)			1500.00				
	TOTAL This Period (last page this line number	only)						

				FOR LINE NUMBER: PAGE 57 / 160
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)
	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Г	Any information conied from such Departs and C	totomonto		13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associ	iation Politic	al Action Committee	
∠ A.	Full Name (Last, First, Middle Initial) Dr. Daniel Fox			Date of Receipt
	Mailing Address 5064 San Juan Pl			M M / D D / Y Y Y Y 05 20 2010
	City	State	Zip Code	Transaction ID: 34926643
	Santa Barbara	CA	93111-2120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pueblo Radiology Medical	Occupatio		
	Group, Inc.	Diagnost	tic Radiologist	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		500.00	
		0.0	0 0 0 0 0 0 0 0	1
- В.	Full Name (Last, First, Middle Initial) Dr. Sean Mauric Freyne			Date of Receipt
	Mailing Address 369 Paseo De Playa A	pt. 303		
	City	Ctoto	Zip Codo	
	City Ventura	State CA	Zip Code 93001-2750	Transaction ID: 34926644 Amount of Each Receipt this Period
	FEC ID number of contributing		00001 2700	
	federal political committee.	C		500.00
	Name of Employer Pueblo Radiology Medical	Occupatio		
	Group Receipt For:		tic Radiologist	_
	Primary General	Aggregate	e Year-to-Date	1
	Other (specify)	0 0	500.00	
– C.	Full Name (Last, First, Middle Initial) Dr. Laurel Hansch	<u>I</u>		Date of Receipt
	Mailing Address 5522 Berkeley Rd			M M / D D / Y Y Y Y
				05 20 2010
	City <u>Santa Barbara</u>	State CA	Zip Code 93111-1616	Transaction ID: 34926646
			33111-1010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pueblo Medical Radiology	Occupatio		
	Group, Inc.	, I – Ŭ – –	tic Radiologist	-1
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1
	Other (specify)		500.00	
-				
	SUBTOTAL of Receipts This Page (optional)			1500.00
┢			•	-
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 58 / 160           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
А.	Full Name (Last, First, Middle Initial) Dr. Lawrence Harter			Date of Receipt
	Mailing Address 5235 Paseo Cameo			05 20 YYYY 2010
	City	State	Zip Code	Transaction ID: 34926647
	Santa Barbara	CA	93111-1133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pueblo Radiology Medical Group	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	500.00	]
в.	Full Name (Last, First, Middle Initial) Dr. Ivan Hayward			Date of Receipt
	Mailing Address 1292 Church St			M · M         /         D · D         /         Y
	City	State	Zip Code	Transaction ID: 34926648
	Ventura	CA	93001-2125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pueblo Radiology Medical Group	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
		Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	500.00	
С.	Full Name (Last, First, Middle Initial) Dr. Christopher Herzig			Date of Receipt
	Mailing Address 318 Contra Costa Aver	nue		05 20 Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34927296
	Ventura	CA	93004-1178	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Pueblo Radiology Medical	Occupatio	n tic Radiologist	
	Group, Inc.	, · · · · · · · · · · · · · · · · · · ·	e Year-to-Date V	—
	Primary General Other (specify) ▼		500.00	]
	SUBTOTAL of Receipts This Page (optional)	I		1500.00
	<b>TOTAL</b> This Period (last page this line number		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 59 / 160         (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	American College of Radiology Assoc	iation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Robert Krause			Date of Receipt
	Mailing Address 1023 Via Ondulando			05 / D D / Y Y Y Y 20 2010
	City	State	Zip Code	Transaction ID: 34927297
	Ventura	CA	93003-1337	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer Pueblo Radiology Medical	Occupatio	on tic Radiologist	
	Group Receipt For:	- <b>I</b>	e Year-to-Date V	_
	Primary General	riggrogati	500.04	
	Other (specify)	0 0		
- В.	Full Name (Last, First, Middle Initial) Dr. Edward Lin	4		Date of Receipt
	Mailing Address 32651 Rachel Cir			05 20 Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34927298
	Dana Point	CA	92629-1066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer Pueblo Radiology Medical Group	Occupatio Diagnos	on tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	500.04	]
- C.	Full Name (Last, First, Middle Initial) Dr. Raymond Mastrovito	1		Date of Receipt
	Mailing Address 2320 Bath Street			05 20 Y Y Y Y 05 20 2010
	City	State	Zip Code	Transaction ID: 34927299
	Santa Barbara	CA	93105-4339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer Pueblo Radiology Medical	Occupatio	on tic Radiologist	
	<u>Group</u> Receipt For:		e Year-to-Date V	_
	Primary General Other (specify) ▼		500.04	
Γ				1500.12
╞	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number	only)		

c	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 60 / 160
	<b>x y</b>	Use separate schedule(s) for each category of the	(check only one)
1	TEMIZED RECEIPTS	Detailed Summary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	American College of Radiology Associ	ation Political Action Committee	
۹.	Full Name (Last, First, Middle Initial) Dr. Su-Ann Ng		Date of Receipt
	Mailing Address 122 W Los Olivos St		0 5 / 2 0 / Y Y Y Y 2 0 1 0
	City	State Zip Code	Transaction ID: 34927300
	Santa Barbara	CA 93105-3930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.04
	Name of Employer Pueblo Radiology Medical	Occupation	
	Group	Diagnostic Radiologist	_
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	500.04	
 3.	Full Name (Last, First, Middle Initial) Dr. Andrew Osburn		Date of Receipt
	Mailing Address 2664 E Granada Aven	M         M         /         D         D         /         Y	
	City	State Zip Code	Transaction ID: 34927308
	Fresno	CA 93720-4613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.04
	Name of Employer Pueblo Radiology Medical	Occupation	
	Group Receipt For:	Diagnostic Radiologist	_
	Primary General	Aggregate Year-to-Date	1
	Other (specify)	500.04	
- ).	Full Name (Last, First, Middle Initial) Dr. Daniel Sommer		Date of Receipt
	Mailing Address 10891 Encino Dr		M         M         /         D         D         /         Y
	City	State Zip Code	Transaction ID: 34927309
	Oak View	CA 93022-9245	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.04
	Name of Employer Pueblo Radiology Med Group	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary     General       Other (specify)	500.04	]
Γ	SUBTOTAL of Receipts This Page (optional)	l	1500.12
┝		P	
	TOTAL This Period (last page this line number	only)	

or for co	ommercial purposes, other than using the IE OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to	13     14     15     16     17       on for the purpose of soliciting contributions
	. ,		solicit contributions from such committee.
		ation Political Action Committee	
<b>A.</b> Dr. V	Name (Last, First, Middle Initial) Villiam Theurer		Date of Receipt
Maili	ng Address 509 Country View Plac	e	05 / D D / Y Y Y Y 20 2010
City		State Zip Code	Transaction ID: 34927310
<u>Car</u>	narillo	CA 93010-8462	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	500.04
	e of Employer blo Radiology Medical	Occupation Diagnostic Radiologist	
<u>Grou</u> Rece	וף Pipt For:	Aggregate Year-to-Date V	—
	Primary General Other (specify) ▼	500.04	]
	Name (Last, First, Middle Initial) ohn Wrench		Date of Receipt
Maili	ng Address 105 Canon Dr		05 20 Y Y Y Y 2010
City		State Zip Code	Transaction ID: 34927311
	ta Barbara	CA 93105-2636	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	500.04
	e of Employer blo Radiology Medical up. Inc.	Occupation Diagnostic Radiologist	
	eipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) $rightarrow$	500.04	]
	Name (Last, First, Middle Initial) errold Teitcher		Date of Receipt
Maili	ng Address 386 Links Dr		M M / D D / Y Y Y Y 05 19 2010
City		State Zip Code	Transaction ID: 34931357
	eanside	NY 11572-5638	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	250.00
	e of Employer I Sloan-Kettering Can	Occupation Diagnostic Radiologist	
<u>Cen</u> Rece	eipt For:	Aggregate Year-to-Date V	-
	Primary General Other (specify) ▼	250.00	]
SUBT	<b>DTAL</b> of Receipts This Page (optional)		1250.08
	This Period (last page this line number		

ę	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 62 / 160 (check only one)
ľ	TEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{c c} \hline X & 11a \\ \hline 13 \\ \hline 13 \\ \hline 14 \\ \hline 15 \\ \hline 16 \\ \hline 17 \\ \hline 16 \\ \hline 17 \\ \hline 17 \\ \hline 17 \\ \hline 10 \\ \hline $
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	American College of Radiology Assoc	ciation Political Action Committee	
×.	Full Name (Last, First, Middle Initial) Dr. Lisa Strawser	Date of Receipt	
	Mailing Address 60 Valley View Lk		M · M         /         D · D         /         Y · Y · Y · Y         Y           0 5         /         1 9         /         2 0 1 0
	City	State Zip Code	Transaction ID: 34931358
	Millville	PA 17846-8608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Jersey Shore Radiology As- sociates	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	400.00	
	Other (specify)		
- 3.	Full Name (Last, First, Middle Initial) Dr. Gerald Decker		Date of Receipt
	Mailing Address 903 Forest Edge Cir		05 / D D / Y Y Y Y 025 / 19 2010
	City	State Zip Code	Transaction ID: 34931359
	lowa	IA 52241-3479	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer Radiology Consultants of Iowa	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	250.00	
_ ).	Full Name (Last, First, Middle Initial) Dr. Colin O'Brien		Date of Receipt
	Mailing Address 542 Clark St		
	City	State Zip Code	Transaction ID: 34931366
	lowa City	IA 52240-5616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Univ of Iowa Hospitals & Clinics	Occupation Diagnostic Radiologist	
	Clinics Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	500.00	
Γ		l	1000.00
┝	SUBTOTAL of Receipts This Page (optional) .		▶
	TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Fo ITEMIZED RECEIPTS	rm 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 63 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Re or for commercial purposes, other th	eports and Statements may not be sold or used by any perso an using the name and address of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiolo	) ogy Association Political Action Committee	
Full Name (Last, First, Middle Init Dr. Alan Kaye	ial)	Date of Receipt
Mailing Address Bridgeport H 267 Grant S		M         M         /         D         D         /         Y
City Bridgoport	State Zip Code CT 06610-2805	Transaction ID: 34931367
Bridgeport FEC ID number of contributing federal political committee.	CT 06610-2805	Amount of Each Receipt this Period
Name of Employer Advanced Radiology Consul- tants	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Init Dr. Adam Dowling	·	Date of Receipt
Mailing Address 701 Crystal	St	0 5 / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0
City	State Zip Code	Transaction ID: 34931401
New Orleans FEC ID number of contributing federal political committee.	LA 70124-3607	Amount of Each Receipt this Period
Name of Employer Ochsner Medical Center-Ke- nner	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Init Dr. Robert Smith	ial)	Date of Receipt
Mailing Address 147 Kimberl	y Dr	05 19 Y Y Y Y 010 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City	State Zip Code	Transaction ID: 34931402
Mandeville FEC ID number of contributing federal political committee.	LA 70448-3325	Amount of Each Receipt this Period
Name of Employer Northshore Imaging Asscoi- ates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page	(optional)	1000.00
	line number only)	

•	TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 64 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       1
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Adam Guttentag		Date of Receipt
	Mailing Address Albert Einstein Medica 5501 Old York Rd	I Center	M         M         /         D         D         /         Y
	City Dhiladalahia	State Zip Code	Transaction ID: 34931431
	Philadelphia FEC ID number of contributing federal political committee.	PA 19141-3098	Amount of Each Receipt this Period
	Name of Employer Albert Einstein HealthCare Network	Occupation Diagnostic Radiologist	_
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	]
	Full Name (Last, First, Middle Initial) Dr. Philip Cook		Date of Receipt
	Mailing Address Cook Diagnostic & Inte 664 Mourning Dove Dr		05 / <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>2</sup> 2010
	City	State Zip Code	Transaction ID: 34931434
	Sarasota FEC ID number of contributing federal political committee.	FL 34236-1926	Amount of Each Receipt this Period
	Name of Employer SMH Radiologists Associat- es, P.C.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	]
-	Full Name (Last, First, Middle Initial) Dr. D Lee Bennett	I	Date of Receipt
	Mailing Address 53 Alder Ct		M M / D D / Y Y Y Y 05 19 2010
	City	State Zip Code	Transaction ID: 34931435
	Iowa City FEC ID number of contributing federal political committee.	IA 52246-9409	Amount of Each Receipt this Period
	Name of Employer University of Iowa	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	·	1550.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER:         PAGE 65 / 160           (check only one)         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not b e name and address	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
	American College of Radiology Assoc	iation Political Ac	tion Committee	
۷ A.	Full Name (Last, First, Middle Initial) Dr. Paul Chang			Date of Receipt
	Mailing Address 1909 N Mohawk St			05 / D D / Y Y Y Y 05 19 2010
	City	State Z	Zip Code	Transaction ID: 34931436
	Chicago		60614-5219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer University of Chicago	Occupation Diagnostic Ra	diologist	
	Receipt For:	Aggregate Year	to-Date 🔻	
	Primary     General       Other (specify) ▼		1000.00	]
- В.	Full Name (Last, First, Middle Initial) Dr. Murray Reicher	1		Date of Receipt
	Mailing Address PO Box 832			M         M         /         D         D         /         Y
	City		Zip Code	Transaction ID: 34931511
	Rancho Santa Fe	CA	92067-0832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer RMG, Inc.	Occupation Diagnostic Ra	diologist	
	Receipt For: Primary General	Aggregate Year-	to-Date 🔻	
	Other (specify) $\bigtriangledown$		500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Scott Porter	<u> </u>		Date of Receipt
	Mailing Address 3816 85th St			M         M         /         D         D         /         Y
	City		Zip Code	Transaction ID: 34931520
		TX	79423-1928	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Diagnostic Ra	diologist	
	Receipt For:	Aggregate Year	to-Date 🔻	
	Primary     General       Other (specify) ▼		250.00	
	SUBTOTAL of Receipts This Page (optional)	1		1750.00
ŀ	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 66 / 160					
	ITEMIZED RECEIPTS		for each category of the	(check only one)					
_			Detailed Summary Page						
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)								
	American College of Radiology Associ	angle American College of Radiology Association Political Action Committee							
Α.	Full Name (Last, First, Middle Initial) Dr. W Shawn Conwell	Date of Receipt							
	Mailing Address 293 Piney Bluff Rd			05 / 16 / Y Y Y Y 2010					
	City	State	Zip Code	Transaction ID: 34931521					
	Rembert	SC	29128-9630	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	Name of Employer Pitts Radiology	Occupatio	on tic Radiologist						
	Receipt For:	1 I	e Year-to-Date 🔻						
	Primary General		500.00	1					
_	Other (specify)	0 0	300.00						
В.	Full Name (Last, First, Middle Initial) Dr. Christopher Hancock			Date of Receipt					
	Mailing Address 177 Ocean Lane Dr Ap	ot 414		05 / <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>D</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>					
	City	State	Zip Code	Transaction ID: 34931522					
	Key Biscayne	FL	33149-1426	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	Name of Employer Mount Sinai Medical Center	Occupatio Diagnos	on tic Radiologist						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary     General       Other (specify) ▼	0 0	500.00						
- C.	Full Name (Last, First, Middle Initial) Dr. Gail Morgan	<u>I</u>		Date of Receipt					
•••	Mailing Address 5253 S Graham St			05 16 2010					
	City	State	Zip Code	Transaction ID: 34931542					
	Seattle	WA	98118-2918	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	Name of Employer Virginia Mason Medical Ce-	Occupatio Diagnos	on tic Radiologist						
	nter Receipt For:	, <b>!</b>	e Year-to-Date V	1					
	Primary General Other (specify) ▼	0 0	500.00	]					
	SUBTOTAL of Receipts This Page (optional)	I	L	1500.00					
ŀ			<b>r</b>						
	TOTAL This Period (last page this line number	only)							

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 67 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
Any or fo	information copied from such Reports and Sta or commercial purposes, other than using the n	tements may not be sold or used by any pers ame and address of any political committee t	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associa	tion Political Action Committee	
<b>A</b> . <u></u>	Full Name (Last, First, Middle Initial) Dr. Christopher Ullrich		Date of Receipt
Ν	Aailing Address Charlotte Radiology PA PO Box 36937		05 / <sup>D</sup> D / <u>Y Y Y Y</u> 2010
	Dity	State Zip Code	Transaction ID: 34931544
-	Charlotte	NC 28236-6937	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C	500.00
N (	lame of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
F	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	626.00	
	Full Name (Last, First, Middle Initial) Dr. Anne Roberts		Date of Receipt
_	Mailing Address UCSD Med Ctr Thorntor 9300 Campus Point Dr		M M / D D / Y Y Y Y 05 / 16 / 2010
	City _a Jolla	State Zip Code CA 92037-1398	Transaction ID: 34931545
F	EC ID number of contributing ederal political committee.	CA 92037-1398	Amount of Each Receipt this Period
N l	Name of Employer JCSD Medical Center	Occupation Diagnostic Radiologist	
F	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1000.00	
	Full Name (Last, First, Middle Initial) Dr. Jacqueline Bello		Date of Receipt
N	Mailing Address Montefiore Medical Cent 111 E 210th St	er	05 / <sup>Y</sup> Y Y Y Y 05 / 16
	Dity	State Zip Code	Transaction ID: 34931551
-	Bronx	NY 10467-2401	Amount of Each Receipt this Period
f:	EC ID number of contributing ederal political committee.		250.00
-	Name of Employer Montefiore Medical Center	Occupation Neuroradiologist	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SU	BTOTAL of Receipts This Page (optional)		1750.00
то	TAL This Period (last page this line number or	nly)	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 68 / 160 (check only one)
	ITEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	└ y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Arl Moore, JR			Date of Receipt
	Mailing Address 1817 Craigmore Dr			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34931553
	<u>Charlotte</u>	NC	28226-6212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Charlotte Radiology	Occupatio	n ic Radiologist	
	Receipt For:	, I – Š – – –	e Year-to-Date V	_
	Primary General	Ayyreyale		-
	Other (specify)	0 0	1000.00	
в.	Full Name (Last, First, Middle Initial) Dr. Loretta Lawrence			Date of Receipt
	Mailing Address 62 Rockcrest Rd			05 0 1 6 Y Y Y Y Y 0 5 1 6 2 0 1 0
	City	State	Zip Code	Transaction ID: 34931554
	Manhasset	NY	11030-3417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer North Shore University Ho- spital	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	, I – Č – –	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Michael J. Seider			Date of Receipt
•	Mailing Address Summa Health System 161 N Forge St Ste 690	า 0		M M / D D / Y Y Y Y 05 16 2010
	City	State	Zip Code	Transaction ID: 34931559
	Akron	OH	44304-1468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Cancer Care Ltd.	Occupation Radiation	n n Oncologist	
	Receipt For:	1 1	Year-to-Date V	
	Primary     General       Other (specify)     ▼	0 0	500.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			1800.00
ŀ	<b>TOTAL</b> This Period (last page this line number of		•	
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 69 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	American College of Radiology Assoc	iation Politic	al Action Committee	
⊻ A.	Full Name (Last, First, Middle Initial) Dr. Barry D. Pressman			Date of Receipt
	Mailing Address Cedars-Sinai Medical 8700 Beverly Blvd Rm			M M / D D / Y Y Y Y 05 / 16 / 2010
	City	State	Zip Code	Transaction ID: 34931560
	Los Angeles FEC ID number of contributing federal political committee.	CA	90048-1869	Amount of Each Receipt this Period
	Name of Employer Cedars-Sinai Medical Cent- er	Occupatio Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00	]
- B.	Full Name (Last, First, Middle Initial) Dr. Robert Rapoport Mailing Address 17 Wedgewood Dr			Date of Receipt
	City	State	Zip Code	Transaction ID: 34931561
	Delmar	NY	12054-1323	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Albany Advanced Imaging	Occupation Neurorad		
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 250.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Mark Adams	1		Date of Receipt
	Mailing Address 12 Bordeaux Way			M M / D D / Y Y Y Y 05 16 2010
	City	State	Zip Code	Transaction ID: 34931562
	Fairport FEC ID number of contributing federal political committee.	NY C	14450-4614	Amount of Each Receipt this Period
	Name of Employer University of Rochester	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			1000.00
ľ	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 70 / 160           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ			
A.	Full Name (Last, First, Middle Initial) Dr. John Braud			Date of Receipt
	Mailing Address 1901 Hwy 190 Apt 222	20		0 5 2 1 Y Y Y Y 0 5 2 1 2 0 1 0
	City	State	Zip Code	Transaction ID: 34931571
	Mandeville FEC ID number of contributing federal political committee.	C	70448-3467	Amount of Each Receipt this Period
	Name of Employer Northshore Imaging Associ- ates Receipt For:	, <b></b>	tic Radiologist	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00	
в.	Full Name (Last, First, Middle Initial) Dr. Johnson Lightfoote Mailing Address 808 S Easthills Dr	I		Date of Receipt
	City	State	Zip Code	0 5 2 1 2 0 1 0 Transaction ID: 34931572
	West Covina FEC ID number of contributing federal political committee.	CA	91791-3449	Amount of Each Receipt this Period 250.00
	Name of Employer Pomona Valley Imaging Med- ical Group Receipt For: Primary General Other (specify)	, I – – – – – – – – – – – – – – – – – –	on tic Radiologist e Year-to-Date ▼ 250.00	7
_	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0 0	
C.	Dr. Ethan Prince Mailing Address 15 Wheeler Ave			Date of Receipt
	City	State	Zip Code	Transaction ID: 34931574
	Cranston	RI	02905-4034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Rhode Island Medical Imag- ing	Occupatio Resident	t	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00	
ſ	SUBTOTAL of Receipts This Page (optional)			750.00
	TOTAL This Period (last page this line number	only)		

				FOR LINE NUMBER: PAGE 71 / 160					
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)					
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
Г	Any information copied from such Reports and St	atements ma	v not be sold or used by any perso	13     14     15     16     17					
	or for commercial purposes, other than using the	a solicit contributions from such committee.							
ſ	NAME OF COMMITTEE (In Full)								
	American College of Radiology Associa		a Action Committee						
A.	Full Name (Last, First, Middle Initial) Dr. Paul Curtis	Date of Receipt							
<b>~</b> .	Mailing Address South Jersey Rad Asso	M M / D D / Y Y Y Y							
	1307 White Horse Rd S	Ste A102	Zin Code	05 21 2010					
	City Voorhees	State NJ	Zip Code 08043-2100	Transaction ID: 34931576 Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		500.00					
	Name of Employer South Jersey Rad Assoc PA	Occupatio		1					
			tic Radiologist	_					
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻						
	Other (specify)		500.00						
-			<u> </u>	4					
в.	Full Name (Last, First, Middle Initial) Dr. Jamil Mohsin			Date of Receipt					
	Mailing Address South Jersey Radiology	M M / D D / Y Y Y Y 05 21 2010							
	1307 White Horse Rd S City	Ste A102 State	Zip Code	Transaction ID: 34931577					
	Voorhees	NJ	08043-2100	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		500.00					
	federal political committee.								
	Name of Employer South Jersey Radiology As-	Occupatio							
	sociates Receipt For:	· ·	tic Radiologist e Year-to-Date ▼	_					
	Primary General	Aggregate		1					
	Other (specify) 🔻		500.00	1					
-	Full Name (Last, First, Middle Initial)								
C.	Dr. Thomas Niedbala			Date of Receipt					
	Mailing Address 758 Riverton Rd			05 / 21 / Y Y Y 2010					
	City	State	Zip Code	Transaction ID: 34931578					
	Moorestown	NJ	08057-1919	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	Name of Employer	Occupatio	n						
	South Jersey Radiology As- sociates		tic Radiologist	_					
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻						
	Other (specify) $\bigtriangledown$		500.00						
F				-					
	SUBTOTAL of Receipts This Page (optional)			1500.00					
ŀ	CODICIAL OF NECEIPIS THIS Fage (Optional)								
	TOTAL This Period (last page this line number of	only)	D						

ę	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 72 / 160
I	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
F				13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa			
Α.	Full Name (Last, First, Middle Initial) Dr. Robert Kanterman			Date of Receipt
	Mailing Address St Lukes Hospital 232 S Woods Mill Rd			M M M         /         D D         /         Y Y Y Y Y           0 5         2 1         2 0 1 0
	City	State	Zip Code	Transaction ID: 34931579
	Chesterfield	MO	63017-3485	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St Luke's Hospital	Occupatio	n tic Radiologist	
	Receipt For:		e Year-to-Date	-
	Primary General	0.0	250.00	1
_	Other (specify)	0 0	230.00	
В.	Full Name (Last, First, Middle Initial) Dr. Diane Icenogle-Leuschen			Date of Receipt
	Mailing Address 105 Palo Alto			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34931580
	Boerne	ТХ	78006-5999	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Audie L. Murphy Veterans Administratio	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	· ·	e Year-to-Date	
	Primary     General       Other (specify) ▼	0 0	500.00	]
– C.	Full Name (Last, First, Middle Initial) Dr. Janak Raval			Date of Receipt
<b>.</b> .	Mailing Address 2 Burrell Ln			
	City	State	Zip Code	Transaction ID: 34931581
	Rancho Palos Verde	CA	90275-5074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Janak Raval, M.D., Inc.	Occupatio Diagnost	n tic Radiologist	
	Receipt For:		e Year-to-Date	
	Primary     General       Other (specify) ▼	0 0	250.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			750.00
- F	, ,		•	-
	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 73 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17
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	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Associ	iation Politic	al Action Committee	
∡.	Full Name (Last, First, Middle Initial) Dr. Mark DeLaurentis	Date of Receipt		
	Mailing Address South Jersey Radiolog 1307 White Horse Rd			05 / 21 / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34931582
	Voorhees	NJ	08043-2100	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As-	Occupatio		
	soc Receipt For:	1 <b>- - -</b>	ic Radiologist	
	Primary General Other (specify) ▼		500.00	]
- 3.	Full Name (Last, First, Middle Initial) Dr. Roger Eng, JR			Date of Receipt
	Mailing Address 7 Soule Rd			0 5 2 1 2 0 1 0
	City	State	Zip Code	Transaction ID: 34931583
	Orinda	CA	94563-1516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Golden Gate Radiology	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify)     ▼		500.00	]
-	Full Name (Last, First, Middle Initial) Dr. Edward Podgorski, JR	L		Date of Receipt
	Mailing Address South Jersey Rad Ass 1307 White Horse Rd			M M         /         D D         /         Y
	City	State	Zip Code	Transaction ID: 34931590
	Voorhees FEC ID number of contributing federal political committee.	NJ C	08043-2100	Amount of Each Receipt this Period 500.00
	Name of Employer South Jersey Rad Assoc PA	Occupatio		
	Receipt For:	1 · · · ·	ic Radiologist	_
	Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		1500.00
┝	SUBTUTAL OF RECEIPTS THIS Page (optional)			
	$\ensuremath{\text{TOTAL}}$ This Period (last page this line number	only)	I	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	<b>3X)</b> Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 74 / 160           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports or for commercial purposes, other than us	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full) American College of Radiology A	Association Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. William Muhr, JR		Date of Receipt					
Mailing Address South Jersey Ra 1307 White Hors		M M / D D / Y Y Y Y 05 / 21 2010					
City	State Zip Code	Transaction ID: 34931591					
Voorhees FEC ID number of contributing federal political committee.	NJ 08043-2100	Amount of Each Receipt this Period 500.00					
Name of Employer South Jersey Rad Assoc PA	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00						
Full Name (Last, First, Middle Initial) Dr. Alfio Pennisi		Date of Receipt					
Mailing Address South Jersey Ra 1307 White Hors	e Rd Ste A102	05 / 21 / Y Y Y Y 2010					
City Voorhees	State Zip Code NJ 08043-2100	Transaction ID: 34931592					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period					
Name of Employer South Jersey Rad Assoc PA	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]					
Full Name (Last, First, Middle Initial) Dr. Charles Holloway		Date of Receipt					
Mailing Address 4855 County Roa	ad 49	M M / D D / Y Y Y Y 05 / 19 / 2010					
City	State Zip Code	Transaction ID: 34937372					
Headland FEC ID number of contributing federal political committee.	AL 36345-8483	Amount of Each Receipt this Period					
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	]					
SUBTOTAL of Receipts This Page (optic	onal)	1250.00					
TOTAL This Period (last page this line n	umber only)						

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 75 / 160           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         1			
Any information copied from such Reports or for commercial purposes, other than usi	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s					
NAME OF COMMITTEE (In Full) American College of Radiology A	-					
Full Name (Last, First, Middle Initial) Dr. Ellen Mendelson			Date of Receipt			
Mailing Address 180 E Pearson S	t Apt 4302		05 19 2010			
City	State	Zip Code	Transaction ID: 34937373			
<u>Chicago</u> FEC ID number of contributing federal political committee.		60611-2171	Amount of Each Receipt this Period 250.00			
Name of Employer Northwestern Medical Facu-	Occupation					
Ity Receipt For: Primary General Other (specify) ▼		Radiologist Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial) Dr. James Halverson		0 0 0 0 0 0 0 0 0	Date of Receipt			
Mailing Address 15256 Wild Wing	S		0 5 / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0			
City Minnetonka	State MN	Zip Code 55345-5700	Transaction ID: 34937374			
FEC ID number of contributing federal political committee.	C	33343-3700	Amount of Each Receipt this Period			
Name of Employer Park Nicollet Clinic	Occupation Diagnostic	e Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial) Dr. Kathleen Barry			Date of Receipt			
Mailing Address 1186 Buckinghan	n Ave		M M / D D / Y Y Y Y 05 19 2010			
City	State	Zip Code	Transaction ID: 34937375			
Birmingham FEC ID number of contributing federal political committee.	MI C	48009-5863	Amount of Each Receipt this Period 350.00			
Name of Employer William Beaumont Hospital	Occupation Diagnostic	Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 350.00				
SUBTOTAL of Receipts This Page (optic	nal)		▶ 1600.00			
TOTAL This Period (last page this line nu	umber only)					

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 76 / 160           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Suzanne Smith	Date of Receipt		
	Mailing Address 150 W 56th St Apt 690	01		M M / D D / Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937376
	New York	NY	10019-3829	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Zwanger-Pesiri Radiology	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	500.00	
в.	Full Name (Last, First, Middle Initial) Dr. Sherri Chafin			Date of Receipt
	Mailing Address 2333 Southampton Dr	r		05 19 Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937407
	Pittsburgh	PA	15241-3327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St. Clair Memorial Hospit- al	1 · · · · ·	ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		250.00	
с.	Full Name (Last, First, Middle Initial) Dr. Kimberlee Overdeck			Date of Receipt
	Mailing Address 1112 Shipman Ln			05 19 Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937408
	Mclean	VA	22101-1542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Northern Virginia Radiolo-	Occupatio	<sup>n</sup> ic Radiologist	
	<u>gy Associates</u> Receipt For:	- <b>-</b>	e Year-to-Date V	
	Primary General Other (specify) ▼		500.00	
ſ	SUBTOTAL of Receipts This Page (optional)	1		1250.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 77 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	son for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Timothy Crummy			Date of Receipt
	Mailing Address 2509 Middleton Beach	Rd		M M / D D / Y Y Y Y 05 / 19 / 2010
	City	State	Zip Code	Transaction ID: 34937410
	Middleton FEC ID number of contributing federal political committee.	C	53562-2912	Amount of Each Receipt this Period
	Name of Employer Madison Radiologists	Occupatio	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 352.10	
В.	Full Name (Last, First, Middle Initial) Dr. David Eckmann Mailing Address 45 S Deep Lake Rd			Date of Receipt
	City	State	Zip Code	0 5 1 9 2 0 1 0 Transaction ID: 34937411
	St Paul	MN	55127-6312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St. Paul Radiology Receipt For:	, I – – – – – – – – – – – – – – – – – –	on tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
С.	Full Name (Last, First, Middle Initial) Dr. Ethan Foxman			Date of Receipt
	Mailing Address 1047 N Main St			M M / D D / Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937420
	West Hartford FEC ID number of contributing federal political committee.	CT	06117-2055	Amount of Each Receipt this Period
	Name of Employer Jefferson Radiology	Occupatio Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 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:       PAGE 78 / 160         (check only one)
F	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Assoc	iation Politic	al Action Committee	
∠ A.	Full Name (Last, First, Middle Initial) Dr. Bennett Greenspan	Date of Receipt		
	Mailing Address Mallinckrodt Institute of 510 S Kingshighway E			05 19 2010
	City	State	Zip Code	Transaction ID: 34937422
	Saint Louis	MO	63110-1016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Washington University Sch-	Occupatio	n tic Radiologist	
	ool of Medici Receipt For:	1 <b>-</b>	e Year-to-Date V	
	Primary General Other (specify) ▼		500.00	]
- В.	Full Name (Last, First, Middle Initial) Dr. Alan Zuckerman			Date of Receipt
	Mailing Address 798 Birds Mill SE			M · M         /         D · D         /         Y · Y · Y         Y
	City	State	Zip Code	Transaction ID: 34937447
	Marietta	GA	30067-5135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Quantum Radiology	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Raja Cheruvu	1		Date of Receipt
	Mailing Address 165 Via Foresta Ln			M M / D D / Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937450
	Williamsville	NY	14221-1984	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		800.00
	Name of Employer Windsong Radiology Group	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	1050.00	
ſ	SUBTOTAL of Receipts This Page (optional)	1		1800.00
ŀ	TOTAL This Period (last page this line number		•	

e				FOR LINE NUMBER: PAGE 79 / 160
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)
1	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associ	ation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Darlene Metter	Date of Receipt		
	Mailing Address UTHSCSA MS 7800 7703 Floyd Curl Dr			05 / 19 / Y Y Y Y 105 / 19
	City	State	Zip Code	Transaction ID: 34937451
	San Antonio	TX	78229-3901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Univ of Texas HSC San Ant-	Occupatio		
	onio Receipt For:	, I –	tic Radiologist e Year-to-Date ▼	
	Primary General	Aggregate		
	Other (specify)	0 0	250.00	
. –	Full Name (Last, First, Middle Initial) Dr. A Semine			Date of Receipt
	Mailing Address 337 Wellesley St			M = M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34937453
	Weston	MA	02493-2621	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Newton Wellesley Radiology	Occupatio	n tic Radiologist	
	Associates Receipt For:		e Year-to-Date V	—
	Primary     General       Other (specify)     ▼		500.00	]
	Full Name (Last, First, Middle Initial) Dr. Valerie Jackson			Date of Receipt
	Mailing Address Indiana Univ Sch of Me 550 University Blvd	ed		M M / D D / Y Y Y Y 05 / 19 / 2010
	City	State	Zip Code	Transaction ID: 34937504
	Indianapolis	IN	46202-5149	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
	Name of Employer Indiana University Sch of	Occupatio Diagnos	n tic Radiologist	
	Med Receipt For:	1 · · · · · ·	e Year-to-Date V	-
	Primary     General       Other (specify)     ▼		1500.00	]
Γ	SUBTOTAL of Receipts This Page (optional)	I		2250.00
┝	CODICIAL OF NECEIPIS THIS FAYE (OPLICIAL)			
	TOTAL This Period (last page this line number	only)	I	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	
A	ny information copied from such Reports and S	tatements may not be sold or used by an	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	American College of Radiology Associ	ation Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Gregory Kugel	Date of Receipt	
	Mailing Address Univ of Florida College PO Box 100374	M M / D D / Y Y Y Y 05 / 19 / 2010	
	City	State Zip Code	Transaction ID: 34937507
	Gainesville	FL 32610-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer University of Florida	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	250.0	0
— В.	Full Name (Last, First, Middle Initial) Dr. Milton J. Guiberteau	1	Date of Receipt
	Mailing Address 1000 Uptown Park Blv	d Apt 253	0 5 / D D / Y Y Y Y 2 0 1 0
	City	State Zip Code	Transaction ID: 34937508
	Houston	TX 77056-3243	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2500.00
	Name of Employer Greater Houston Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	2500.0	00
 C.	Full Name (Last, First, Middle Initial) Dr. Mary Newell		Date of Receipt
	Mailing Address 4485 Briarcliff Rd NE		M M / D D / Y Y Y Y 05 / 19 / 2010
	City	State Zip Code	Transaction ID: 34937510
	Atlanta	GA 30345-2148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Emory University	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify)	300.0	00
5	SUBTOTAL of Receipts This Page (optional)		3050.00
	<b>FOTAL</b> This Period (last page this line number	only)	•

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee 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.       Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. J Daniel Hanks, JR       Date of Receipt         Mailing Address       Rome Radiology Group PA       Date of Receipt         City       State       Zip Code         Rome       GA       30165-1694         FEC ID number of contributing federal political committee.       Occupation       Diagnostic Radiologist         Name of Employer       General       Occupation       Date of Receipt         Mailing Address       250 River Oak Dr       Tansaction ID: 34937528         City       State       Zip Code       Tansaction ID: 34937528         Receipt For:	e. V O d
American College of Radiology Association Political Action Committee         A.       Full Name (Last, First, Middle Initial)         Dr. J Daniel Hanks, JR       Date of Receipt         Mailing Address       Rome Radiology Group PA         1104 Martha Berry Blvd NE       Dis / 19 / 20         City       State       Zip Code         Rome       GA       30165-1694         FEC ID number of contributing       C       Transaction ID: 34937526         Amount of Each Receipt ID: 34937526       Amount of Each Receipt ID: 34937526         Name of Employer       Occupation         Name of Employer       Diagnostic Radiologist         Receipt For:       Primary         Other (specify) ▼       1000.00         B.       Full Name (Last, First, Middle Initial)         Dr. Frederick Murphy       Date of Receipt         Mailing Address       2507 River Oak Dr         City       State       Zip Code         Decatur       GA       30033-2813         FEC ID number of contributing federal political committee.       C         Peceipt Or       GA       30033-2813         FEC Do number of contributing federal political committee.       C         Primary       General       Diagnostic Radiologist	0 d
A.       Dr. J Daniel Hanks, JR       Date of Receipt         Mailing Address       Rome Radiology Group PA       1104 Martha Berry Blvd NE         City       State       Zip Code         Rome       GA       30165-1694         FEC ID number of contributing federal political committee.       C       Transaction ID: 34937526         Name of Employer Rome Radiology Group, PA       Occupation Diagnostic Radiologist       Amount of Each Receipt this Peri 1000         B.       Primary       General Other (specify)       Date of Receipt         Mailing Address       2507 River Oak Dr       Transaction ID: 34937526         Mailing Address       250.00       Transaction ID: 34937526         Mailing Address       250.00       Transaction ID: 34937526	0 d
1104 Martha Berry Blvd NE       0.5       1.9       2.0         City       State       Zip Code       Transaction ID: 34937526         Rome       GA       30165-1694       Transaction ID: 34937526         FEC ID number of contributing rederal political committee.       C       1000         Name of Employer Rome Radiology Group, PA       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       1000.00       0         Other (specify) ▼       Aggregate Year-to-Date ▼       0.5       1.9       2.0         Transaction ID: 34937528       Aggregate Year-to-Date ▼       0.5       1.9       2.0         B.       Full Name (Last, First, Middle Initial)       Date of Receipt       0.5       1.9       2.0         City       State       Zip Code       Transaction ID: 34937528       Amount of Each Receipt this Peri         FEC ID number of contributing rederal political committee.       C       Transaction ID: 34937528       Amount of Each Receipt this Peri         FEC ID number of contributing rederal political committee.       C       Transaction ID: 34937528       Amount of Each Receipt this Peri         Feecipt For:       Aggregate Year-to-Date ▼       250.00       Date of Receipt       250.00         Primary       General <td>0 d</td>	0 d
City       State       Zip Code       Transaction ID: 34937526         Rome       GA       30155-1694       Amount of Each Receipt this Perification ID: 34937526         FEC ID number of contributing federal political committee.       C       1000         Name of Employer       Occupation       Diagnostic Radiologist         Aggregate Year-to-Date ▼       1000.00       Date of Receipt         Bailing Address       2507 River Oak Dr       0       0         City       State       Zip Code       Transaction ID: 34937526         Decatur       GA       30033-2813       Amount of Each Receipt this Perification ID: 34937528         Amount of contributing federal political committee.       C       Transaction ID: 34937528         Decatur       GA       30033-2813       Amount of Each Receipt this Perification ID: 34937528         Receipt For:       Ga       30033-2813       Amount of Each Receipt this Perification ID: 34937528         Pecatur       GA       30033-2813       Amount of Each Receipt this Perification ID: 34937528         Receipt For:       Occupation       Diagnostic Radiologist       Amount of Each Receipt this Perification ID: 34937528         Receipt For:       Aggregate Year-to-Date ▼       Date of Receipt       250.00         Primary       General       Diagn	
FEC ID number of contributing federal political committee.       C       1000         Name of Employer Rome Radiology Group, PA       Occupation Diagnostic Radiologist       1000.00         Receipt For: Primary General Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         0 ther (specify) ▼       Date of Receipt       05 1 9 / 2 0         7       City       State       Zip Code         Decatur       GA       30033-2813         FEC ID number of contributing federal political committee.       C       7 0 9 / 2 0         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist       Amount of Each Receipt this Peri 250.00         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary General Other (specify) ▼       Occupation Diagnostic Radiologist       Date of Receipt         Receipt For: Primary General Other (specify) ▼       Aggregate Year-to-Date ▼          C.       Full Name (Last, First, Middle Initial) Dr. Gordon Beute Mailing Address 6411 Wardell Ct       Date of Receipt	
federal political committee.       Image: committee.       Image: committee.       Image: committee.         Name of Employer Rome Radiology Group, PA       Diagnostic Radiologist       Image: committee.       Image: committee.         Primary       General       000.00       Image: committee.       Image: committee.       Image: committee.         B.       Full Name (Last, First, Middle Initial)       Dr. Frederick Murphy       Image: committee.       Image: committee.	00
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Intervention         B.       Full Name (Last, First, Middle Initial)         Dr. Frederick Murphy       Date of Receipt         Mailing Address       2507 River Oak Dr         City       State       Zip Code         Decatur       GA       30033-2813         FEC ID number of contributing federal political committee.       Occupation         Diagnostic Radiologist       Aggregate Year-to-Date ▼         Name of Employer Emory University Hospital       Occupation         Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       Occupation         Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼         Dr. Gordon Beute       Date of Receipt         Mailing Address       6411 Wardell Ct	
Primary       General         Other (specify) ▼       1000.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Frederick Murphy       Date of Receipt         Mailing Address       2507 River Oak Dr         City       State       Zip Code         Decatur       GA       30033-2813         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Perilling         Name of Employer Emory University Hospital       Diagnostic Radiologist       Aggregate Year-to-Date       ▼         Primary       General       Occupation       Diagnostic Radiologist       Date of Receipt         C       Primary       General       Diagnostic Radiologist       Date of Receipt         Dr. Gordon Baute       Date of Receipt       Date of Receipt         Mailing Address       6411 Wardell Ct       Date of Receipt	
Other (specify) ▼       1000.00         Full Name (Last, First, Middle Initial)       Dr. Frederick Murphy         Mailing Address       2507 River Oak Dr         City       State       Zip Code         Decatur       GA       30033-2813         FEC ID number of contributing federal political committee.       C       Transaction ID: 34937528         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       Q50.00       Date of Receipt         Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         Mailing Address       6411 Wardell Ct       Mm / D D / Y 2 0	
B.       Dr. Frederick Murphy       Date of Receipt         Mailing Address       2507 River Oak Dr       0 5 / 19 / 2 0         City       State       Zip Code         Decatur       GA       30033-2813         FEC ID number of contributing federal political committee.       C       250         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General Other (specify) ▼       250.00       Date of Receipt         Dull Name (Last, First, Middle Initial)       Dr. Gordon Beute       Date of Receipt         Mailing Address       6411 Wardell Ct       M M / D / Y Y O	
City       State       Zip Code       Transaction ID: 34937528         Decatur       GA       30033-2813       Amount of Each Receipt this Peri         FEC ID number of contributing federal political committee.       C       250         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       250.00       Date of Receipt         Full Name (Last, First, Middle Initial)       Dr. Gordon Beute       Date of Receipt         Mailing Address       6411 Wardell Ct       M M / D D / Y Y 0	
Decatur       GA       30033-2813       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       250         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist       250         Receipt For:       Aggregate Year-to-Date ▼       250.00         Primary       General       250.00         Other (specify) ▼       Date of Receipt         Mailing Address       6411 Wardell Ct	
FEC ID number of contributing federal political committee.       250         Name of Employer Emory University Hospital       Occupation Diagnostic Radiologist         Receipt For:       Aggregate Year-to-Date ▼         Primary       General Other (specify) ▼         Other (specify) ▼       250.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Gordon Beute       Mailing Address         Mailing Address       6411 Wardell Ct	
federal political committee.	d
Receipt For:       Aggregate Year-to-Date         Primary       General         Other (specify) ▼       250.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Gordon Beute       05 / 19 / 20	00
Primary       General         Other (specify)       ▼         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Gordon Beute       Date of Receipt         Mailing Address       6411 Wardell Ct	
Other (specify)       250.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Gordon Beute       Date of Receipt         Mailing Address       6411 Wardell Ct	
Dr. Gordon Beute       Date of Receipt         Mailing Address       6411 Wardell Ct         0 5       1 9         2 0	
05 19 20	
City State Zip Code Transaction ID: 34937531	
West Bloomfield MI 48324-2880 Amount of Each Receipt this Peri	
FEC ID number of contributing federal political committee.	d
Name of Employer Henry Ford Health Care Sy- stemsOccupationDiagnostic Radiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 82 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Maryellyn Gilfeather			Date of Receipt
	Mailing Address 54 E Churchill Dr			M · M         /         D · D         /         Y · Y · Y · Y         Y
	City	State	Zip Code	Transaction ID: 34937532
	Salt Lake City FEC ID number of contributing federal political committee.	UT	84103-2266	Amount of Each Receipt this Period
	Name of Employer Utah Imaging Associates	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Joel Canter Mailing Address 8 Shelly Hill Rd			Date of Receipt
	City	State	Zip Code	0 5 1 9 2 0 1 0 Transaction ID: 34937533
	<u>Stanfordville</u>	NY	12581-6062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Dutchess Radiology Associ- ates Receipt For:	, I – – – – – – – – – – – – – – – – – –	on tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
C.	Full Name (Last, First, Middle Initial) Dr. Patrick Juenemann			Date of Receipt
	Mailing Address 10976 Mississppi Dr			M M / D D / Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937534
	Champlin	MN	55316-3504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Suburban Radiologic Consu- Itants	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0.0	500.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 83 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	/ not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	American College of Radiology Assoc	ciation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Charles Grimes	Date of Receipt		
	Mailing Address 2 Park Cir			M M / D D / Y Y Y Y 05 / 19 / 2010
	City	State	Zip Code	Transaction ID: 34937535
	Cape Elizabeth	ME	04107-9682	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Spectrum Medical Group	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date	
	Primary     General       Other (specify) ▼	0 0	250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Matthew Pollack			Date of Receipt
	Mailing Address 3780 Tiffany Dr			05 19 Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937572
	Easton	PA	18045-3041	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Warren Radiology Associat- es	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary     General       Other (specify)	0 0	500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. William Simpson, JR			Date of Receipt
	Mailing Address 224 W 18th St Apt 5D	)		05 / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>
	City	State	Zip Code	Transaction ID: 34937575
	New York	NY	10011-4534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Mount Sinai Medical Center		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date V	_
	Primary     General       Other (specify)	0 0	250.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1000.00
F	TOTAL This Period (last page this line number			

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 84 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         1'
or for c	commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	ME OF COMMITTEE (In Full) nerican College of Radiology Associa	ation Politic	al Action Committee	
	Name (Last, First, Middle Initial) Jonathan Lewin	Date of Receipt		
Mai	ling Address Johns Hopkins Medicin 601 N Caroline St	ie		05 / D D / Y Y Y Y 05 19 2010
City	,	State	Zip Code	Transaction ID: 34937593
<u>Ba</u>	ltimore	MD	21287-0001	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		250.00
Nar Joh	ne of Employer ns Hopkins Medicine	Occupation Diagnost	n ic Radiologist	
Red	ceipt For:	Aggregate	Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	250.00	
	Name (Last, First, Middle Initial) Mark Stein			Date of Receipt
Mai	ling Address 18951 Glenmount Ter			M M / D D / Y Y Y Y 05 19 2010
City	,	State	Zip Code	Transaction ID: 34937594
Irv	ne	CA	92603-3507	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		250.00
We	ne of Employer st Coast Radiology	Occupation Diagnost	n ic Radiologist	
Red	eipt For: Primary General	Aggregate	Year-to-Date	_
	Other (specify)		250.00	
	Name (Last, First, Middle Initial) Joshua Hirsch			Date of Receipt
Mai	ling Address 1 Longfellow PI Apt 340	07		M M / D D / Y Y Y Y 05 19 2010
City		State	Zip Code	Transaction ID: 34937596
	ston	MA	02114-2432	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		250.00
Nar Laf	ne of Employer ley Clinic	Occupation Diagnost	n ic Radiologist	
Red	ceipt For:	Aggregate	Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	250.00	
SURT	I OTAL of Receipts This Page (optional)			750.00
	L This Period (last page this line number of		•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 85 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
⊻ A.	Full Name (Last, First, Middle Initial) Dr. Jesse Chusid			Date of Receipt
	Mailing Address North Shore University 300 Community Dr	y Hospital		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34937601
	Manhasset FEC ID number of contributing federal political committee.	NY C	11030-3816	Amount of Each Receipt this Period 350.00
	Name of Employer North Shore University Ho-	Occupatio		
	spital Receipt For:	- I	tic Radiologist e Year-to-Date ▼	_
	Primary General Other (specify) ▼		350.00	]
- 3.	Full Name (Last, First, Middle Initial) Dr. Daniel Marder			Date of Receipt
	Mailing Address Washington Radiology 2141 K St NW Ste 900			0 5 / 1 9 / Y Y Y Y 2 0 1 0
	City	State DC	Zip Code	Transaction ID: 34937604
	Washington FEC ID number of contributing federal political committee.	C	20037-1810	Amount of Each Receipt this Period
	Name of Employer Washington Radiology Asso- ciates	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
- ).	Full Name (Last, First, Middle Initial) Dr. Rona Woldenberg	I		Date of Receipt
	Mailing Address 6 Cove Ln			05 19 Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937607
	Great Neck FEC ID number of contributing	NY C	11024-1723	Amount of Each Receipt this Period 500.00
	federal political committee.	Occupatio	n	
	Name of Employer North Shore University Ho- <u>sp</u>		tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00	
Γ				1350.00
┝	SUBTOTAL of Receipts This Page (optional)			
	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 86 / 160           (check only one)         11a         11b         11c         12           X         11a         14         15         16         17
	Any information copied from such Reports and s or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Kevin Cregan	Date of Receipt		
	Mailing Address Wayne Radiologists 2700 Medical Office P	lace		05 19 2010
	City	State	Zip Code	Transaction ID: 34937609
	Goldsboro	NC	27534-9460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer Wayne Radiologists	Occupation Diagnos	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	650.00	]
- B.	Full Name (Last, First, Middle Initial) Dr. Mark Russell			Date of Receipt
	Mailing Address 102 Whispering Hills	St		05 / D D / Y Y Y Y 09 19 2010
	City	State	Zip Code	Transaction ID: 34937623
	Hot Springs	AR	71901-7319	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Hot Springs Radiology Svc- s.	Occupation Diagnos	<sup>m</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0.0	250.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Keith Fischer	1		Date of Receipt
	Mailing Address 1 Lenox PI			M M         /         D D         /         Y Y Y Y         Y <th< td=""></th<>
	City	State	Zip Code	Transaction ID: 34937626
	Saint Louis	MO	63108-1901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Washington University Med- ical Center	Occupatio Diagnos	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	250.00	
ſ	SUBTOTAL of Receipts This Page (optional).			900.00
ŀ	TOTAL This Period (last page this line number		•	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 87 / 160         (check only one)       11a         X       11a       11b       11c       12         12       14       15       16       17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	13     14     15     16     17       n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc		
∠ ۹.	Full Name (Last, First, Middle Initial) Dr. Ronald Townsend		Date of Receipt
	Mailing Address 5450 S Autumn Ct		05 <sup>10</sup> 19 <sup>2010</sup>
	City	State Zip Code	Transaction ID: 34937655
	Greenwood Village	CO 80111-3417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Univ of CO Health Sci Cen-	Occupation	7
	ter Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date	-1
	Primary General Other (specify) ▼	500.00	
	Full Name (Last, First, Middle Initial) Dr. Gerald Dodd, III		Date of Receipt
	Mailing Address Univ of Colorado Hlth 12401 E 17th Ave Lep		M M / D D / Y Y Y Y 05 / 19 / 2010
	City	State Zip Code	Transaction ID: 34937656
	Aurora	CO 80045-2548	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer Univ of Texas Hith Sci Ctr	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	250.00	
— ).	Full Name (Last, First, Middle Initial) Dr. Susan Danahy	1	Date of Receipt
	Mailing Address 38 Old Farm Cir		05 19 2010
	City	State Zip Code	Transaction ID: 34937659
	Pittsford	NY 14534-3006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer Borg Imaging Group, LLP	Occupation Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	250.00	
	SUBTOTAL of Receipts This Page (optional)	L	1000.00
	<b>FOTAL</b> This Period (last page this line number		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each	parate schedule(s) n category of the d Summary Page	FOR LINE NUMBER:         PAGE 88 / 160           (check only one)         (check 112)           X         11a         11b         11c         12           13         14         15         16         11
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may not be sol	d or used by any pers y political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology A	ssociation Political Action	Committee	
Full Name (Last, First, Middle Initial) Dr. W Ross Stevens			Date of Receipt
Mailing Address 2743 S Veterans	Pkwy Apt 312		05 19 Y Y Y Y 05 19 2010
City	State Zip Co	ode	Transaction ID: 34937664
Springfield FEC ID number of contributing federal political committee.	L 62704	4-6402	Amount of Each Receipt this Period 250.00
Name of Employer Reliant Radiology	Occupation Diagnostic Radiolo	ogist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. James Hevezi Mailing Address CyberKnife Cente	r of Miami		Date of Receipt
7867 N Kendall D	r Ste 105		05 19 2010
City Miami	State Zip Co FL 33150	ode 6-7735	Transaction ID: 34937667 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self-Employed	Occupation Physicist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 250.00	]
Full Name (Last, First, Middle Initial) Dr. Manuel Rose			Date of Receipt
Mailing Address 14334 Eagle Poir	te Dr		05 19 2010
City Clearwater	State Zip Co FL 3376	ode 2-2214	Transaction ID: 34937669 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Rose Radiology	Occupation Diagnostic Radiolo	oaist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	•	
SUBTOTAL of Receipts This Page (optic	nal)		1000.00
<b>TOTAL</b> This Period (last page this line nu	mber only)		

	SCHEDIII E A (EEC Form 2V)			FOR LINE NUMBER: PAGE 89 / 160
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associ	ation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. David Dombroski			Date of Receipt
	Mailing Address 4140 East Ave			M M / D D / Y Y Y Y 05 19 2010
	City	State	Zip Code	Transaction ID: 34937670
	Rochester	NY	14618-3741	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Univ of Rochester Med Ctr	Occupatio	n tic Radiologist	_
	Receipt For:		e Year-to-Date V	
	Primary General	33 - 34	350.00	1
	Other (specify)			1
В.	Full Name (Last, First, Middle Initial) Dr. George Autz			Date of Receipt
	Mailing Address Complete Women's Im 440 Merrick Rd	aging PC		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34937671
	<u>Oceanside</u>	NY	11572-1404	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Complete Women's Imaging, P.C.	Occupation Diagnosi	n tic Radiologist	
	Receipt For:	, i – č – i	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	250.00	]
C.	Full Name (Last, First, Middle Initial) Dr. Ezeguiel Silva, III			Date of Receipt
0.	Mailing Address 120 W Lynwood Ave			0 5 2 1 2 0 1 0
	City	State	Zip Code	Transaction ID: 34937726
	San Antonio	TX	78212-2497	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer South Texas Radiology Gro-	Occupatio		
	up, P.A. Receipt For:	_ <b>I</b>	tic Radiologist e Year-to-Date ▼	
	Primary General	riggrogati		1
	Other (specify) ▼	0 0	1000.00	
	SUBTOTAL of Receipts This Page (optional)		······	1600.00
	TOTAL This Period (last page this line number	only)		
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	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 90 / 160           (check only one)
Any or fo	information copied from such Reports and St or commercial purposes, other than using the	13     14     15     16     17       on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Associa			
	Full Name (Last, First, Middle Initial) Ms. Marilyn Wexler			Date of Receipt
-	Mailing Address 722 Kingman Ave			M · M         /         D · D         Y         Y · Y · Y         Y
	City	State	Zip Code	Transaction ID: 34937727
_	Santa Monica	CA	90402-1336	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		250.00
1	Name of Employer Self-Employed	Occupation Medical F		
Ī	Receipt For:	Aggregate	e Year-to-Date	
	Other (specify)	0 0	250.00	]
B	Full Name (Last, First, Middle Initial) Dr. Richard Szucs			Date of Receipt
ا -	Mailing Address 3526 Crossings Way			M         M         /         D         D         Y
	City	State	Zip Code	Transaction ID: 34937743
-	Midlothian	VA	23113-6348	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		250.00
	Name of Employer Commonwealth Radiology, P.C.		ic Radiologist	
I	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Dr. Loralie Ma			Date of Receipt
1	Mailing Address 11605 Mirror Pond Ct			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34937744
-	Fulton	MD	20759-2305	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		500.00
_	Name of Employer Advanced Radiology, P.A.	Occupation Diagnost	<sup>n</sup> ic Radiologist	
I		Aggregate	e Year-to-Date ▼	
	Primary     General       Other (specify) ▼	0 0	500.00	
su	BTOTAL of Receipts This Page (optional)			1000.00
	TAL This Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 91 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         1 <sup>1</sup>
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
×.	Full Name (Last, First, Middle Initial) Dr. Mark Vaughn			Date of Receipt
	Mailing Address 328 Wickham Glen Dr			05 <sup>/</sup> /21 <sup>/</sup> /2010
	City	State	Zip Code	Transaction ID: 34937745
	Richmond	VA	23238-6160	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Commonwealth Radiology,	Occupatio	<sup>n</sup> tic Radiologist	
	P.C. Receipt For:	, i – č –	e Year-to-Date V	-
	Primary     General       Other (specify)	U U U 0 0	500.00	]
_	Full Name (Last, First, Middle Initial) Dr. Alan Padgett			Date of Receipt
	Mailing Address 12805 Saddleseat PI			05 / Y Y Y Y 021 / 2010
	City	State	Zip Code	Transaction ID: 34937763
	Richmond	VA	23233-7687	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Commonwealth Radiology, P.C.	Occupation Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary     General       Other (specify)     The second	0 0	500.00	
_	Full Name (Last, First, Middle Initial) Dr. Nick Maravich, JR			Date of Receipt
	Mailing Address 660 Chester Ave			05 21 2010
	City	State	Zip Code	Transaction ID: 34937772
	Moorestown	NJ	08057-1902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Assoc of Burlin- gton	Occupation Diagnosi	n tic Radiologist	
	Receipt For:	_ <b>I</b>	e Year-to-Date V	
	Primary     General       Other (specify)	0 0	500.00	]
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		1000.00
┝	SUBICIAL OF RECEIPTS THIS Page (optional)			
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedul for each category of th Detailed Summary Pag	
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by a e name and address of any political comr	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	American College of Radiology Assoc	iation Political Action Committee	
⊻ A.	Full Name (Last, First, Middle Initial) Dr. Frederick White		Date of Receipt
	Mailing Address 29083 Ynez Rd		05 / 21 / Y Y Y 2010
	City	State Zip Code	Transaction ID: 34937778
	Temecula	CA 92592-2335	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Hemet Radiology	Occupation Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	500.	00
– B.	Full Name (Last, First, Middle Initial) Dr. Harry Knipp	1	Date of Receipt
	Mailing Address 603 Earlton Ct		05 / 21 / Y Y Y 05 21 2010
	City	State Zip Code	Transaction ID: 34937779
	Reisterstown	MD 21136-4602	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Advanced Radiology PA	Occupation Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify)	250.	00
- C.	Full Name (Last, First, Middle Initial) Dr. Elizabeth Yung		Date of Receipt
	Mailing Address 43 Compo Mill Cv		05 / D D / Y Y Y Y 05 21 2010
	City	State Zip Code	Transaction ID: 34937780
	Westport	CT 06880-6612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Winthrop University Hospi- tal	Occupation Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date V	
	Other (specify) ▼	250.	00
	SUBTOTAL of Receipts This Page (optional)	•	1000.00
F	TOTAL This Period (last page this line number	only)	

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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 93 / 160 (check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
[	Any information copied from such Reports and St	atements ma	v not be sold or used by any perso	13     14     15     16     17       on for the purpose of soliciting contributions
	or for commercial purposes, other than using the	o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politio	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Nicholas Carlevato			Date of Receipt
	Mailing Address Tahoe Carson Radiolog			M M / D D / Y Y Y
	2874 N Carson St Ste 3 City	300 State	Zip Code	0 5 2 1 2 0 1 0 Transaction ID: 34937788
	Carson City	NV	89706-1683	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Tahoe Carson Radiology	Occupatio		—
	Receipt For:		tic Radiologist e Year-to-Date ▼	_
	Primary General	Aggregate		1
-	Other (specify) <b>v</b>	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Dr. Michael Kupfer			Date of Receipt
	Mailing Address 2547 Montecito Ave			M M         /         D D         /         Y Y Y Y         Y <thy< th="">         Y</thy<>
	City	State	Zip Code	Transaction ID: 34937797
	Westlake Village	CA	91362-5140	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer West Valley Radiology	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	· ·	e Year-to-Date	-
	Primary     General       Other (specify) ▼	0 0	250.00	]
С.	Full Name (Last, First, Middle Initial) Dr. William Lowry			Date of Receipt
	Mailing Address Radiology Assoc of Tai 816 W Cannon St	rrant Co PA		05 / 21 / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34937799
	Fort Worth	TX	76104-3146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Radiology Associates of	Occupatio	n tic Radiologist	
	Tarrant County Receipt For:		e Year-to-Date V	
	Primary General		2000.00	1
	Other (specify) <b>v</b>			1
	SUBTOTAL of Receipts This Page (optional)			1750.00
	<b>TOTAL</b> This Period (last page this line number of	only)		
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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 94 / 160 (check only one)
I	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
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	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associ	ation Politic	al Action Committee	
∡ A.	Full Name (Last, First, Middle Initial) Dr. Henry Wang			Date of Receipt
	Mailing Address 12 Coach Side Ln			0 5 / D D / Y Y Y Y Y 0 5 2 1 2 0 1 0
	City	State	Zip Code	Transaction ID: 34937807
	Pittsford	NY	14534-9413	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Univ of Rochester Medical	Occupatio	n tic Radiologist	
	Ctr Receipt For:	, I – Ŭ	e Year-to-Date V	
	Primary General	-gg. cgu	500.00	1
	Other (specify)	0 0	500.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Mark Luedke			Date of Receipt
	Mailing Address 26 Hooper Hill Rd			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34937808
	New Boston	NH	03070-3804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SNHRC	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date V	
	Primary     General       Other (specify) ▼	0 0	500.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. George Erbacher	1		Date of Receipt
~•	Mailing Address 3211 West 73rd St			M M / D D / Y Y Y Y 05 21 2010
	City	State	Zip Code	Transaction ID: 34937809
	Tulsa	OK	74132-2206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Diagnostic Imaging Associ-	Occupatio		
	ates Inc.	1 1	ional Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	1
	Other (specify)	0 0	250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	I		1250.00
ŀ				
	TOTAL This Period (last page this line number	only)	····· •	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 95 / 160           (check only one)         11a           X         11a           13         14           15         16           17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	American College of Radiology Associ	iation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Scott Schultz			Date of Receipt
	Mailing Address 5011 Schaefer Rd			05 / 21 / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34937823
	Edina	MN	55436-1142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Minneapolis Radiology Ass-	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	oc Receipt For:	1 I	e Year-to-Date V	
	Primary General Other (specify)	0 0	250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Michael Redwine			Date of Receipt
	Mailing Address Univ Texas Med Schoo 6431 Fannin St Ste 2.1	130B		M M / D D / Y Y Y Y 05 / 21 / 2010
	City	State	Zip Code	Transaction ID: 34937824
	Houston FEC ID number of contributing	тх С	77030-1501	Amount of Each Receipt this Period
	federal political committee.			
	Name of Employer University of Texas - Hou- ston	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)	0 0	250.00	
– C.	Full Name (Last, First, Middle Initial) Dr. Clarence Davis, III			Date of Receipt
	Mailing Address 609 Springlake Rd			M - M         /         D - D         /         Y - Y - Y         Y           0 5         2 1         2 0 1 0
	City	State	Zip Code	Transaction ID: 34937849
	Columbia	SC	29206-2150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Lexington Radiology Assoc- iates	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	I		750.00
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SCHEDULE A (FEC Form		(check only one)					
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12					
		13 14 15 16 17					
Any information copied from such Report or for commercial purposes, other than u	ny information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full)							
American College of Radiology	Association Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. David Haas							
Mailing Address Steinberg Diag I 2950 S Marylan		M         M         /         D         D         /         Y					
City	State Zip Code	Transaction ID: 34937873					
Las Vegas	NV 89109-2257	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer Steinberg Diag Med Imaging	Occupation	-					
Steinberg Diag Med Imaging	Diagnostic Radiologist						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General	250.00	11					
Other (specify)							
Full Name (Last, First, Middle Initial) Dr. Gary Dillehay		Date of Receipt					
Mailing Address Northwestern M 251 E Huron St	em Hosp	M M         /         D P         /         Y Y Y Y         Y <th< td=""></th<>					
City	State Zip Code	Transaction ID: 34937883					
Chicago	IL 60611-3197	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	1000.00					
Name of Employer Northwestern Medical Facu-	Occupation						
Ity Foundatio	Diagnostic Radiologist						
Receipt For:	Aggregate Year-to-Date	_					
Primary     General       Other (specify) ▼	1000.00	]					
Full Name (Last, First, Middle Initial) Dr. Tim Emory		Date of Receipt					
Mailing Address 1958 Bayard Av	/e	05 21 2010					
City	State Zip Code	Transaction ID: 34937885					
Saint Paul	MN 55116-1216	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		250.00					
Name of Employer University of Minnesota	Occupation Diagnostic Radiologist	-					
Receipt For:	Aggregate Year-to-Date ▼	1					
Primary General Other (specify) ▼	250.00	]					
SUBTOTAL of Receipts This Page (opt	tional)	1500.00					
TOTAL This Period (last page this line	number only)	-					

ç	SCHEDULE A (FEC Form 3X)		<b> </b>	FOR LINE NUMBER: PAGE 97 / 160
	TEMIZED RECEIPTS		te schedule(s) tegory of the	(check only one)
	I EMIZED RECEIP 13		mmary Page	X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Assoc	iation Political Action Cor	mmittee	
Α.	Full Name (Last, First, Middle Initial) Dr. Vickie Massey			Date of Receipt
	Mailing Address 805 W 51st St			05 / 21 / Y Y Y Y 05
	City	State Zip Code		Transaction ID: 34937896
	Kansas City	MO 64112-23	72	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Kansas City Cancer Centers	Occupation Radiation Oncologist		
	Receipt For:	Aggregate Year-to-Date	▼	_
	Primary     General       Other (specify)     ▼		1000.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Thomas Seward	I		Date of Receipt
	Mailing Address 222 Oxford Ave			M         M         /         D         D         /         Y
	City	State Zip Code		Transaction ID: 34937899
	Terrace Park	<u>OH 45174-11</u>	51	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Northeast Radiology	Occupation Diagnostic Radiologis	st	
	Receipt For:	Aggregate Year-to-Date	•	
	Primary     General       Other (specify)		250.00	
– c.	Full Name (Last, First, Middle Initial) Dr. Anthony Antonoplos			Date of Receipt
	Mailing Address 2505 Observatory Ave			M         M         /         D         D         /         Y
	City	State Zip Code		Transaction ID: 34937900
	Cincinnati	OH 45208-12	.12	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Northeast Radiology	Occupation Diagnostic Radiologis	st	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary     General       Other (specify) ▼		250.00	
Γ	SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	1500.00
	TOTAL This Period (last page this line number		<b>r</b>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 98 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17			
Any information copied from such Reports a or for commercial purposes, other than using	Ind Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Action Committee				
Full Name (Last, First, Middle Initial) Dr. Eric Spickler		Date of Receipt			
Mailing Address 151 Manorwood D	r	0 5 / D D / Y Y Y Y 0 5 / 2 1 2 0 1 0			
City	State Zip Code	Transaction ID: 34937916			
Bloomfield Hills FEC ID number of contributing federal political committee.	MI 48304-2134	Amount of Each Receipt this Period 500.00			
Name of Employer Henry Ford Hospital	Occupation Diagnostic Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Dr. David Butler		Date of Receipt			
232 S Woods Mill	Mailing Address St Lukes Hospital 232 S Woods Mill Rd Ste 110 East				
City Chesterfield	State Zip Code MO 63017-3485	Transaction ID: 34937917			
FEC ID number of contributing federal political committee.	MO 63017-3485	Amount of Each Receipt this Period 500.00			
Name of Employer Radiation Oncology Consul- tants of W. C	Occupation Radiation Oncologist				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Dr. Naveen Parti		Date of Receipt			
Mailing Address 15 Crescent Ave		M M / D D / Y Y Y Y 05 21 2010			
City	State Zip Code	Transaction ID: 34937920			
<u>Greenville</u> FEC ID number of contributing federal political committee.	SC 29605-2810	Amount of Each Receipt this Period 251.00			
Name of Employer Greenville Radiology	Occupation				
Receipt For: Primary General Other (specify)	Diagnostic Radiologist         Aggregate Year-to-Date ▼         251.00	-			
SUBTOTAL of Receipts This Page (ontion	al)	1251.00			
	nber only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 99 / 160           (check only one)         11a         11b         11c         12           13         14         15         16         17			
	Any information copied from such Reports and St or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to so					
	American College of Radiology Associa	ation Politic	al Action Committee				
∠ A.	Full Name (Last, First, Middle Initial) Dr. Mark Ridlen			Date of Receipt			
	Mailing Address Rhode Island Medical I 20 Catamore Blvd	05 21 Y Y Y 2010					
	City	State	Zip Code	Transaction ID: 34937923			
	East Providence	RI	02914-1204	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Rhode Island Medical Imag-	Occupatio					
	ing Receipt For:	-	tic Radiologist e Year-to-Date ▼	_			
	Primary General Other (specify) ▼		500.00	]			
- B.	Full Name (Last, First, Middle Initial) Dr. Clayton Trimmer			Date of Receipt			
	Mailing Address 2005 Cottonwood Valle	05 / D D / Y Y Y Y 021 2010					
	City	State	Zip Code	Transaction ID: 34937925			
	Irving	TX	75038-5928	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer University of Texas South- west	Occupation Diagnost	<sup>m</sup> tic Radiologist				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	500.00	]			
- C.	Full Name (Last, First, Middle Initial) Dr. Philip Lund			Date of Receipt			
	Mailing Address Valley Radiologists 533 S 336th St Ste C			05 <sup>/</sup> /21 <sup>/</sup> YYYY 2010			
	City	State	Zip Code	Transaction ID: 34937926			
	Federal Way	WA	98003-6329	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer Valley Radiologists	Occupation Diagnos	n tic Radiologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date  1000.00	]			
ſ	SUBTOTAL of Receipts This Page (optional)			2000.00			
ľ	TOTAL This Period (last page this line number of	only)					

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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 100 / 160         (check only one)       X         X       11a       11b       11c       12         I       13       14       15       16       17			
	Any information copied from such Reports and S or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to su					
	NAME OF COMMITTEE (In Full)						
	American College of Radiology Associ	ation Politic	al Action Committee				
4.	Full Name (Last, First, Middle Initial) Dr. James Baek			Date of Receipt			
	Mailing Address 1701 Stonehenge Rd			05 21 2010			
	City	State	Zip Code	Transaction ID: 34937927			
	Charleston	WV	25314-1675	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Kanawha Valley Radiology	Occupatio Diagnost	n tic Radiologist				
	Receipt For:		e Year-to-Date V	-			
	Primary     General       Other (specify) ▼		500.00	]			
- 3.	Full Name (Last, First, Middle Initial) Dr. Patricia Martin			Date of Receipt			
	Mailing Address 1759 Creek View Dr			05 / Y Y Y Y 21 2010			
	City	State	Zip Code	Transaction ID: 34937928			
	Fogelsville	PA	18051-1716	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Med Imaging of Lehigh Val- ley	Occupatio Diagnost	<sup>m</sup> tic Radiologist				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify)     ▼	0 0	500.00	]			
- ;.	Full Name (Last, First, Middle Initial) Dr. Kevin Bannon			Date of Receipt			
	Mailing Address 1759 Creek View Dr			0 5 2 1 2 0 1 0			
	City	State	Zip Code	Transaction ID: 34937929			
	Fogelsville	PA	18051-1716	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Medical Imaging of Lehigh	Occupatio Diagnost	<sup>m</sup> tic Radiologist				
	Valley Receipt For:	, <b>i</b>	e Year-to-Date V	-			
	Primary     General       Other (specify) ▼		500.00	]			
ſ	SUBTOTAL of Receipts This Page (optional)	l		1500.00			
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Any information copied from such Reports and Statements may not be sold or used by any person for the purposes of soliciting contributions from such committee.         NAME OF COMMITTEE (in Full)         NAME OF COMMITTEE (in Full)         Anerican College of Radiology Association Political Action Committee         Full Name (Last, First, Middle Initia)         Dr. Mark Bramwit         Maiing Address         Bedminster         NJ         Ofter of contributing federal political committee.         Name of Employer University Radiology Group         Distate       Zip Code         Name of Employer University Radiology Group         Dite of Receipt         Mailing Address       163 SW Elizabeth St         City       State         Primary       General         Other (specify) ▼       365.00         Full Name (Last, First, Middle Initia)       Dr. James Hasenauer         Mailing Address       163 SW Elizabeth St         City       State       Zip Code         Portland       OR       97201-1706         FEC ID number of contributing federal political committee.       State       Zip Code         Name of Employer Receipt State       Occupation       Diagnostic Radiologist         Agregate Year-to-Date       State       Stoto <th></th> <th>SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS</th> <th></th> <th>Use separate schedule(s) for each category of the Detailed Summary Page</th> <th>FOR LINE NUMBER:       PAGE 101 / 160         (check only one)       11a         X       11a         13       14         15       16         17</th>		SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 101 / 160         (check only one)       11a         X       11a         13       14         15       16         17			
NAME OF COMMITTEE (In Full)       American College of Radiology Association Political Action Committee         A.       Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Mark Starmvil       Date of Receipt         Bedminister       NJ       07281-2888         FED: ID number of contributing       C       Transaction ID: 34937934         Amount of Each Receipt The Period       Section         Period       Cocupation         Diversity Radidogy Group       Disgnostic Radiologist         Aggregate Year-to-Date       V         Phinary       General         Other (specify) ret.       Aggregate Year-to-Date         Diagnostic Radiologist       Aggregate Year-to-Date         Mailing Address       1536 SW Elizabeth St         City       State         Portified       Occupation         Diagnostic Radiologist       Aggregate Year-to-Date         Aggregate Year-to-Date       V         Primary       General         Other (specify) v       State         Et ID number of contributing technologist       Aggregate Year-to-Date V         Primary       General         Other (specify) v       State         Primary       General         Other (specify) v		Any information copied from such Reports and or for commercial purposes, other than using the	In y information copied from such Reports and Statements may not be sold or used by any persor					
A.       Dr. Mark Brämwi       Date of Receipt         Mailing Address 55 Janelle Ct       0.5 ° 2.1 ° 2.01.0         City       State       Zip Code         Bedminister       NJ       07221:288         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt in End of Receipt         Name of Employer       Occupation       Diagnostic Radiologist       Amount of Each Receipt in End of Scoop         No of the repective of contributing federal political committee.       C       2 ° 2 ° 2 ° 2 ° 2 ° 2 ° 2 ° 2 ° 2 ° 2 °		NAME OF COMMITTEE (In Full)						
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Bedminster     NJ     07921-2898       FEC ID number of contributing feteral policial committee.     C       Name of Employee University Radiologist Receipt For: Other (specify) ♥     Occupation Diagnostic Radiologist Aggregate Year-to-Date ♥       B.     Full Name (Last, First, Middle Initial) Other (specify) ♥     Date of Receipt Date of Receipt Diagnostic Radiologist Date of Receipt Date of Receipt       B.     Full Name (Last, First, Middle Initial) Other (specify) ♥     Date of Receipt Date of Receipt Date of Receipt Date of Receipt       City     State     Zip Code       Portland     OR     97201-1706       Pertiand     OCcupation Diagnostic Radiologist     Amount of Each Receipt IN Date of Receipt       Name of Enployee Heat Notitized committee.     Occupation Diagnostic Radiologist     Amount of Each Receipt IN Diagnostic Radiologist       Name (Last, First, Middle Initial) Dr. Anthony Yudd     Occupation Diagnostic Radiologist     Date of Receipt       Diagnostic Radiologist Heat Notify ♥     Occupation Diagnostic Radiologist     Date of Receipt       Other (specify) ♥     State     Zip Code     Transaction ID: 34938392       Amount of Each Receipt IN: Period     EC     Transaction ID: 34938392       Amount of Each Receipt IN: Period     EC     City       Dr. Anthony Yudd     NJ     07090-4202       Primary     General     Occupation Diagnostic Radiologist       Nad		Mailing Address 55 Janelle Ct						
FEC ID number of contributing rederal political committee.       C       365.00         Name of Employer Unressity Radiology Group       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         B.       Full Name (Last, First, Middle Initial) Other (specify) ▼       Date of Receipt         B.       Full Name (Last, First, Middle Initial) Other (specify) ▼       Date of Receipt         B.       Full Name (Last, First, Middle Initial) Other (specify) ▼       Date of Receipt         B.       Full Name (Last, First, Middle Initial) Other (specify) ▼       State       Zip Code         POrtland       OR       97201-1706       Transaction ID: 34393891         Amount of Each Receipt the Period       FEC ID number of contributing rederal political committee.       C       Amount of Each Receipt the Period         Patiology Specialists of In No Nortiwest       Diagnostic Radiologist       Aggregate Year-to-Date ▼       Transaction ID: 34938391         C.       Full Name (Last, First, Middle Initial)       Disc of Receipt       Mount of Each Receipt the Period         C.       Full Name (Last, First, Middle Initial)       Disc of Receipt       No       Transaction ID: 34938392         Malling Address       12 Fairhill Rd       Disc of Receipt       No       Transaction ID: 34938392         C.       Full Name (Last, First, Middle Initial)       Disc of Receipt<		,		•				
federal political committee.			NJ	07921-2898	Amount of Each Receipt this Period			
University Radiology Group       Diagnostic Radiologist         Receipt For:       Aggregate Year-to-Date ▼         B.       Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. James Hasenauer       Date of Receipt         Mailing Address       1636 SW Elizabeth St         City       State       Zip Code         Portland       OR       97201-1706         FEC ID number of contributing teleral political committee.       C       Amount of Each Receipt this Period         Mailing Address       12 Bairoll Radiologist       Amount of Each Receipt this Period         Mailing Address       12 Bairoll Radiologist       Amount of Each Receipt this Period         Primary       General       Occupation       Diagnostic Radiologist         Primary       General       Aggregate Year-to-Date ▼       Date of Receipt         Dr. Anthony Yudd       Mailing Address       12 Bairbill Rd       Date of Receipt         City       State       Zip Code       Transaction ID: 343938392         Westfield       NJ       07090-4202       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       Date of Receipt       250.00         Westfield       NJ       07090-4202       Amount of Each Receipt t			C		365.00			
Primary       General         Other (specify)       365.00         B.       Full Name (Last, First, Middle Initial)       Dr. James Hasemauer         Mailing Address       1636 SW Elizabeth St       Date of Receipt         City       State       Zip Code         Portland       OR       97201-1706         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer Radiologist the Northwest       Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       OC       500.00         Dide of Receipt       State       Zip Code         Name of Employer Radiologist the Northwest       Diagnostic Radiologist       Aggregate Year-to-Date ▼         Other (specify) ▼       General       OC       Date of Receipt         Mailing Address       12 Fairhill Rd       Transaction ID: 34938392         Chiy       State       Zip Code       Transaction ID: 34938392         Macount of Each Receipt Ins Period       Transaction ID: 34938392       Transaction ID: 34938392         Macount of Each Receipt Ins Period       C       State       Zip Code         Mailing Address       12 Fairhill Rd       State       Zip Code         Receipt For:		Name of Employer University Radiology Group						
Other (specify) ▼       365.00         B.       Full Name (Last, First, Middle Initial)         Dr. James Hasenauer       Date of Receipt         Mailing Address       1636 SW Elizabeth St         City       State       Zip Code         Portland       OR       97201-1706         FEC ID number of contributing federal political committee.       C       Transaction ID: 34938391         Amount of Encloyer       Aggregate Year-to-Date ▼       500.00         Name of Encloyer       Aggregate Year-to-Date ▼       Date of Receipt         Date of Receipt       0       State       Zip Code         Name of Encloyer       Aggregate Year-to-Date ▼       500.00       Date of Receipt         C.       Full Name (Last, First, Middle Initial)       Date of Receipt       Milling Address       12 Fairhill Rd         City       State       Zip Code       Milling Address       12 Fairhill Rd       Transaction ID: 34938392         Westfield       NJ       07090-2022       Amount of Each Receipt this Period       250.00         Primary       General       Occupation       Diagnostic Radiologist       Amount of Each Receipt this Period         Mailing Address       12 Fairhill Rd       Diagnostic Radiologist       Amount of Each Receipt this Period       250.00			Aggregate	e Year-to-Date 🔻	_			
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FEC ID number of contributing federal political committee.       C       500.00         Name of Employer Radiology Specialists of the Northwest       Occupation Diagnostic Radiologist       D         Name of Employer Receipt For: Other (specify) ♥       Aggregate Year-to-Date ♥       Image: Contributing 0 for (specify) ♥       Date of Receipt         C.       Full Name (Last, First, Middle Initial) Dr. Anthony Yudd       Date of Receipt       Date of Receipt         Mailing Address       12 Fairhill Rd       Date of Receipt       Date of Receipt         City       State       Zip Code       Zip Code         Westfield       NJ       07090-4202       Transaction ID: 34938392         FEC ID number of contributing federal political committee.       C       Transaction ID: 34938392         Name of Employer Radiology Ghp of New Brun- swick       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ♥         Primary       General       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ♥       11115.00         SUBTOTAL of Receipts This Page (optional)       1115.00       Image: Control of Control o		•		Zip Code	Transaction ID: 34938391			
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the Northwest       Dragnostic Radiologist         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       500.00         C.       Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Anthony Yudd       Date of Receipt         Mailing Address       12 Fairhill Rd       0.5 2.1 / 2.01.0         City       State       Zip Code         Westfield       NJ       07090-4202         FEC ID number of contributing federal political committee.       C       250.00         Name of Employer       Aggregate Year-to-Date ▼       250.00         Name of Employer       Aggregate Year-to-Date ▼       1115.00         SUBTOTAL of Receipts This Page (optional)       1115.00       1115.00			C		500.00			
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       500.00         Full Name (Last, First, Middle Initial)       Dr. Anthony Yudd         Dr. Anthony Yudd       Date of Receipt         Mailing Address       12 Fairhill Rd         City       State       Zip Code         Westfield       NJ       07090-4202         FEC ID number of contributing federal political committee.       C         Name of Employer Radiology Gip of New Brunswick.       Occupation         Name of Employer Radiology Gip of New Brunswick.       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼         SUBTOTAL of Receipts This Page (optional)       1115.00		Name of Employer Radiology Specialists of the Northwest						
Other (specify) ▼       500.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Anthony Yudd       Date of Receipt         Mailing Address 12 Fairhill Rd       0         City       State       Zip Code         Westfield       NJ       07090-4202         FEC ID number of contributing tederal political committee.       C       250.00         Name of Employer Radiology Grp of New Brunswick       Occupation Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       250.00       1115.00         SUBTOTAL of Receipts This Page (optional)       1115.00		Receipt For:	Aggregate	e Year-to-Date 🔻				
C.       Dr. Anthony Yudd       Date of Receipt         Mailing Address       12 Fairhill Rd       0 5       2 1       2 0 1 0         City       State       Zip Code       Transaction ID: 34938392         Westfield       NJ       07090-4202       Amount of Each Receipt this Period         FEC ID number of contributing tederal political committee.       C       250.00         Name of Employer Radiology Grp of New Brunswick       Occupation Diagnostic Radiologist       250.00         Name of Employer Radiology Grp of New Brunswick       Aggregate Year-to-Date ▼       1115.00         SUBTOTAL of Receipts This Page (optional)       1115.00       1115.00				500.00	]			
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Westfield       NJ       07090-4202       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       250.00         Name of Employer Radiology Grp of New Brunswick       Occupation Diagnostic Radiologist       250.00         Receipt For:       Aggregate Year-to-Date ▼       250.00         Primary       General Other (specify) ▼       250.00         SUBTOTAL of Receipts This Page (optional)       1115.00		Mailing Address 12 Fairhill Rd						
FEC ID number of contributing federal political committee.       C       250.00         Name of Employer Radiology Grp of New Brunswick       Occupation Diagnostic Radiologist       250.00         Name of Employer Radiology Grp of New Brunswick       Occupation Diagnostic Radiologist       250.00         Primary       General       250.00       1115.00         SUBTOTAL of Receipts This Page (optional)       1115.00       1115.00		-		•	Transaction ID: 34938392			
federal political committee.       2000         Name of Employer Radiology Grp of New Brun- swick       Occupation Diagnostic Radiologist         Receipt For: Primary Other (specify) ♥       Aggregate Year-to-Date ♥         SUBTOTAL of Receipts This Page (optional)       1115.00			NJ	07090-4202	Amount of Each Receipt this Period			
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 102 / 160           (check only one)         X           X         11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	13     14     15     16     17       on for the purpose of soliciting contributions       on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ			
Α.	Full Name (Last, First, Middle Initial) Dr. Robert Pyatt, JR			Date of Receipt
	Mailing Address 1391 Hearthside Dr			05 21 Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34938393
	Chambersburg	PA	17201-3389	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Chambersburg Imaging Asso- ciates	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	500.00	]
в.	Full Name (Last, First, Middle Initial) Dr. Katherine Hall			Date of Receipt
	Mailing Address 6530 Meadow Rd			05 / 21 / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34938395
	Dallas	TX	75230-5226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Baylor Univ Body Imaging Flwshp	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	500.00	
C.	Full Name (Last, First, Middle Initial) Dr. Stephen Brown			Date of Receipt
	Mailing Address 3635 N 250 W			05 21 2010
	City	State	Zip Code	Transaction ID: 34938406
	Provo	UT	84604-4428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Utah Valley Radiology	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	500.00	]
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (F ITEMIZED RECE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 103 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from	m such Reports and Statements ma s, other than using the name and ad	⊥ y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTE American College o	E (In Full) f Radiology Association Politic	al Action Committee	
Full Name (Last, First, I Mrs. Cynthia Moran	Middle Initial)		Date of Receipt
Mailing Address 170	1 Pennsylvania Ave.		0 5 2 1 Y Y Y Y 0 5 2 1 2 0 1 0
City	State	Zip Code	Transaction ID: 34938412
Washington	DC	20006-5805	Amount of Each Receipt this Period
FEC ID number of cont federal political committ			250.00
Name of Employer American College of Ra logy	adio- Occupatio Assistan	n t Executive Director	
Receipt For:	00 0	e Year-to-Date 🔻	
Other (specify)	General	250.00	
Full Name (Last, First, I Dr. Victor Scarmato	Middle Initial)		Date of Receipt
Mailing Address 14	/alley Rd		0 5 / 2 1 / Y Y Y Y 0 5 / 2 1 / 2 0 1 0
City	State	Zip Code	Transaction ID: 34938417
<u>Glen Cove</u>	NY	11542-1314	Amount of Each Receipt this Period
FEC ID number of cont federal political committ			250.00
Name of Employer Nassau University Med Center	ical Occupatio	<sup>n</sup> ic Radiologist	
Receipt For:	I ~ ~	e Year-to-Date 🔻	
Primary Other (specify) ▼	General	250.00	
Full Name (Last, First, I Dr. Amy Kirby	Middle Initial)		Date of Receipt
	9 Pulchella Dr		0 5 2 1 2 0 1 0
City	State	Zip Code	Transaction ID: 34938419
Oklahoma City	OK	73142-6811	Amount of Each Receipt this Period
FEC ID number of cont federal political committ			100.00
Name of Employer Eagle Eye Imaging	Occupatio Radiolog	<sup>n</sup> y Resident	
	General	e Year-to-Date ▼ 900.00	
Other (specify)	0 0		
SUBTOTAL of Receipts	This Page (optional)		600.00
TOTAL This Period (last	page this line number only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 104 / 160           (check only one)         11a           X         11a           13         14           15         16           17			
A C	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for 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 Assoc	iation Politic	al Action Committee				
∡ ۹.	Full Name (Last, First, Middle Initial) Dr. Avice O'Connell			Date of Receipt			
	Mailing Address 3390 Elmwood Ave			05 / 21 / Y Y Y Y 05 / 21 / 2010			
	City	State	Zip Code	Transaction ID: 34938422			
	Rochester	NY	14610-3437	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer University of Rochester	Occupatio Diagnost	<sup>n</sup> ic Radiologist				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify)	0 0	500.00				
- 3.	Full Name (Last, First, Middle Initial) Ms. Alicia Vasquez			Date of Receipt			
	Mailing Address 242 N. Pasadena			05 / 21 / Y Y Y Y 05 / 21 / 2010			
	City	State	Zip Code	Transaction ID: 34938424			
	Azusa	CA	91702-3723	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Arcadia Radiology	Occupatio Administ					
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary     General       Other (specify)     Image: Constraint of the second	0 0	250.00				
	Full Name (Last, First, Middle Initial) Dr. Wendy Stiles			Date of Receipt			
	Mailing Address 506 W Holly St			0 5 2 1 2 0 1 0			
	City	State	Zip Code	Transaction ID: 34938429			
	Phoenix	AZ	85003-1119	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer Night Shift Radiology	1 · · · · ·	ic Radiologist				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_			
	Other (specify)		500.00				
Γ	SUBTOTAL of Receipts This Page (optional)			1250.00			
	TOTAL This Period (last page this line number		•				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 105 / 160           (check only one)         11a           X         11a           13         14           15         16           17
[	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc			
A.	Full Name (Last, First, Middle Initial) Dr. Thomas Philbrick			Date of Receipt
	Mailing Address 217 E Jones St			M - M         /         D - D         /         Y - Y - Y         Y           0 5         2 1         2 0 1 0
	City	State	Zip Code	Transaction ID: 34938430
	<u>Savannah</u>	GA	31401-4703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Savannah Radiology	Occupatio Diagnos	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	<ul> <li>Primary General</li> <li>Other (specify) ▼</li> </ul>	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Howard Ansel			Date of Receipt
	Mailing Address 8310 Cedar Lake Rd S	5		M + M         /         D + D         /         Y
	City	State	Zip Code	Transaction ID: 34938431
	Saint Louis Park	MN	55426-2418	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer University of Minnesota Physicians	Occupatio Diagnos	<sup>on</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	250.00	
- С.	Full Name (Last, First, Middle Initial) Dr. Howard Fleishon			Date of Receipt
	Mailing Address 3690 E Camino Sin N	ombre		M = M         /         D = D         Y         Y = Y         Y           0 5         2 1         2 0 1 0
	City	State	Zip Code	Transaction ID: 34938432
	Paradise Valley	AZ	85253-5011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Valley Radiologists LTD		tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		1000.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 106 / 160					
		Use separate schedule(s) for each category of the	(check only one)					
		Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$					
	Any information copied from such Reports and So or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s						
	NAME OF COMMITTEE (In Full)							
	American College of Radiology Associ	ation Political Action Committee						
Α.	Full Name (Last, First, Middle Initial) Dr. John Patti		Date of Receipt					
	Mailing Address 11 Willard Ln		05 / 21 / Y Y Y Y 2010					
	City	State Zip Code	Transaction ID: 34938433					
	Lynnfield	MA 01940-1735	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	2500.00					
	Name of Employer John A. Patti, M.D., Inc.	Occupation Diagnostic Radiologist						
	Receipt For:	Aggregate Year-to-Date V						
	Primary General	2500.00	1					
-	Other (specify) <b>v</b>							
в.	Full Name (Last, First, Middle Initial) Dr. Jeffrey Creasy		Date of Receipt					
	Mailing Address Vanderbilt Univ 1161 21st Ave S		M         M         /         D         D         /         Y					
	City	State Zip Code	Transaction ID: 34938441					
	Nashville	TN 37232-0001	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.		250.00					
	Name of Employer Vanderbilt Univ Medical Center	Occupation Diagnostic Radiologist						
	Receipt For:	Aggregate Year-to-Date V						
	Primary     General       Other (specify) ▼	250.00	]					
C.	Full Name (Last, First, Middle Initial) Dr. Albert Blumberg	L	Date of Receipt					
	Mailing Address Greater Baltimore Med 6701 N Charles St	ical Ctr	0 5 / 2 1 / Y Y Y Y 0 5 / 2 1 2 0 1 0					
	City	State Zip Code	Transaction ID: 34938442					
	Baltimore	MD 21204-6881	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	1000.00					
	Name of Employer Greater Baltimore Medical Ctr	Occupation Radiation Oncologist						
	Receipt For:	Aggregate Year-to-Date ▼						
	<ul><li>Primary General</li><li>Other (specify) ▼</li></ul>	1000.00	]					
	SUBTOTAL of Receipts This Page (optional)	······	3750.00					
	TOTAL This Period (last page this line number							
		·····						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fc	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER:       PAGE 107 / 160         (check only one)       11a         X       11a       11b         13       14       15       16       17				
	or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so						
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation Political A	ction Committee					
Α.	Full Name (Last, First, Middle Initial) Dr. Dana Smetherman			Date of Receipt				
	Mailing Address 7 Richmond Pl	0 5 / 2 1 2 0 1 0						
	City	State	Zip Code	Transaction ID: 34938854				
	New Orleans	LA	70115-5019	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Ochsner Clinic	Occupation Diagnostic Ra	adiologist					
	Receipt For:	Aggregate Yea						
	Primary General Other (specify) ▼		250.00	]				
В.	Full Name (Last, First, Middle Initial) Dr. Steven Cohen			Date of Receipt				
	Mailing Address 28 Salem Rd			05 / D D / Y Y Y Y 21 2010				
	City		Zip Code	Transaction ID: 34938856				
	Westport	CT	06880-3726	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Advanced Radiology Consul- tants	Occupation Diagnostic Ra	adiologist					
	Receipt For:	Aggregate Year	r-to-Date 🔻					
	Other (specify)	0 0 0	250.00					
- с.	Full Name (Last, First, Middle Initial) Dr. Dennis Kay			Date of Receipt				
	Mailing Address 834 Lakeshore Pkwy			05 / D D / Y Y Y Y 05 21 2010				
	City		Zip Code	Transaction ID: 34939268				
	New Orleans	LA	70124-3618	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Ochsner Clinic	Occupation Diagnostic Ra	adiologist					
	Receipt For: Primary General	Aggregate Year	r-to-Date 🔻	_				
	Other (specify) ▼		250.00					
	SUBTOTAL of Receipts This Page (optional)			750.00				
Ī	TOTAL This Period (last page this line number	r only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 108 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and St or for commercial purposes, other than using the	son for the purpose of soliciting contributions	
	American College of Radiology Associa	ation Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. James Junker		Date of Receipt
	Mailing Address 16 Fox Meadows	05 21 Y Y Y Y 05 21 2010	
	City	State Zip Code	Transaction ID: 34939270
	Saint Louis	MO 63127-1401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Scott Radiological Group,	Occupation Diagnostic Radiologist	
	Inc. Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	750.00	
- В.	Full Name (Last, First, Middle Initial) Dr. James Thrall		Date of Receipt
	Mailing Address Massachusetts Genera 55 Fruit St	•	M         M         /         D         D         /         Y         Y         Y         Y           0         5         /         2         1         /         2         0         1         0
	City	State Zip Code	Transaction ID: 34939271
	Boston FEC ID number of contributing federal political committee.	MA 02114-2620	Amount of Each Receipt this Period
	Name of Employer Massachusetts General Hos- pital	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify) ▼	2500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Carol Rumack		Date of Receipt
	Mailing Address Univ of Colorado-Denv 13001 E 17th Place Bo		M · M         /         D · D         /         Y · Y · Y · Y         Y         Y · Y · Y         Y
	City	State Zip Code	Transaction ID: 34939272
	Aurora	CO 80045-2505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2500.00
	Name of Employer Univ of Colorado School	Occupation	
	of Medecine Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date	
	Primary General Other (specify) ▼	2500.00	
ſ	SUBTOTAL of Receipts This Page (optional)		5250.00
ŀ	TOTAL This Period (last page this line number of	only)	•
SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 109 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17	
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Any information copied from such Reports a or for commercial purposes, other than using	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)	sociation Political Action Committee		
Full Name (Last, First, Middle Initial) Dr. Alan Matsumoto		Date of Receipt	
Mailing Address 3302 Rosebud Ln		M M / D D / Y Y Y Y 05 21 2010	
City	State Zip Code	Transaction ID: 34939861	
Charlottesville	VA 22903-9348	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer UVA Health System	Occupation Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1000.00	]	
Full Name (Last, First, Middle Initial) Dr. Daniel Finelli		Date of Receipt	
Mailing Address 38700 Gaelic Glen	1	M M         /         D D         /         Y Y         Y Y         Y	
City	State Zip Code	Transaction ID: 34939862	
Solon	OH 44139-5933	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Cleveland Clinic Foundati- on	Occupation Diagnostic Radiologist		
	Aggregate Year-to-Date 🔻		
Primary     General       Other (specify)     ▼	250.00	]	
Full Name (Last, First, Middle Initial) Dr. Patrick Lester		Date of Receipt	
Mailing Address 1228 E 21st Pl		M         M         /         D         D         /         Y	
City	State Zip Code	Transaction ID: 34939863	
Tulsa	OK 74114-1216	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Servant Medical Imaging	Occupation Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date <b>V</b>		
Other (specify) ▼	250.00		
SUBTOTAL of Receipts This Page (option	al)	1500.00	
	nber only)		

ITEMIZED R	A (FEC Form 3X) ECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER:       PAGE 110 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
Any information cop or for commercial p	ied from such Reports and Sta urposes, other than using the n	tements may not b ame and address of	e sold or used by any perso of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	MITTEE (In Full) lege of Radiology Associa	tion Political Act	tion Committee	
	First, Middle Initial)			
A. Dr. David Kuehn	. ,			Date of Receipt
Mailing Address	University of Iowa Hosp 200 Hawkins Dr 3980 JF			05 / 21 / Y Y Y Y 025 / 21 / 2010
City		State Z	ïp Code	Transaction ID: 34939864
lowa City	<b>6</b>	IA 5	52242-1007	Amount of Each Receipt this Period
FEC ID number federal political c		C		500.00
Name of Employ University of Iow	er a Hosp	Occupation	dialogiat	7
<u>&amp; Clinics</u> Receipt For:		Diagnostic Ra Aggregate Year-		-
Primary	General		500.00	
Other (spe	cify) 🔻	0 0 0 0	300.00	
Full Name (Last, Dr. Jinha Park	First, Middle Initial)			Date of Receipt
Mailing Address	5825 Lincoln Ave			05 24 Y Y Y Y 05 24 2010
City		State Z	ip Code	Transaction ID: 34940443
Buena Park		<u>CA</u>	0620-3463	Amount of Each Receipt this Period
FEC ID number federal political c		C		250.00
Name of Employ University of Sou lifornia	er uthern Ca-	Occupation Diagnostic Ra	diologist	
Receipt For:		Aggregate Year-	•	-
Primary Other (spe	General General ⊂		250.00	
Full Name (Last, Dr. Kate Feinsteir	First, Middle Initial)			Date of Receipt
Mailing Address		edical Cent IC 2026		05 24 2010
City			ip Code	Transaction ID: 34940445
Chicago		IL e	60637-1447	Amount of Each Receipt this Period
FEC ID number federal political c		C		500.00
Name of Employ University of Chi	er cago Hos-	Occupation Diagnostic Ra	diologist	
pital Receipt For:		Aggregate Year-		-
Primary Other (spe	General cify) <b>▼</b>		500.00	
				1250.00
SUBTOTAL of Re	ceipts This Page (optional)		N	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 111 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements main name and ad	⊥ y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. James Borgstede			Date of Receipt
	Mailing Address 3995 Kakatosi Ln			05 / 24 / Y Y Y Y 005 / 24
	City	State	Zip Code	Transaction ID: 34940446
	Colorado Springs	CO	80908-3239	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer Colorado Springs Radiolog- ists	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	2500.00	]
в.	Full Name (Last, First, Middle Initial) Dr. Stanley Ignatow			Date of Receipt
	Mailing Address 546 Woodbrook Ln			M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: 34940447
	Cincinnati	OH	45215-2513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Professional Radiology,	Occupatio Diagnost	n tic Radiologist	
	Inc. Receipt For:	, I – Ŭ	e Year-to-Date V	
	Primary General Other (specify) ▼		250.00	]
С.	Full Name (Last, First, Middle Initial) Dr. William Thorwarth, JR			Date of Receipt
	Mailing Address Catawba Radiological PO Box 308	Assoc		05 / 24 / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34940448
	Hickory	NC	28603-0308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Catawba Radiological Asso-	Occupatio	<sup>n</sup> tic Radiologist	
	<u>ciates</u> Receipt For:	1 · · · · ·	e Year-to-Date V	—
	Primary General Other (specify) ▼		500.00	]
	SUBTOTAL of Receipts This Page (optional)	I		3250.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 112 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
ہ م	Any information copied from such Reports and St r for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Political Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Bonnie Litvack		Date of Receipt
	Mailing Address 5 Buttonhook Rd		05 24 Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34940449
	Chappaqua	NY 10514-1200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer White Plains Radiology As-	Occupation	7
	sociates Receipt For:	Diagnostic Radiologist	_
	Primary General Other (specify)	250.00	
— В.	Full Name (Last, First, Middle Initial) Dr. George Belhobek		Date of Receipt
	Mailing Address Cleveland Clinic Hospit 9500 Euclid Ave Rm A2	21	05 / 24 / Y Y Y Y Y 05 / 24 2010
	City	State Zip Code	Transaction ID: 34940450
	<u>Cleveland</u> FEC ID number of contributing federal political committee.	OH 44195-0001 C	Amount of Each Receipt this Period 250.00
	Name of Employer Cleveland Clinic Hospital	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify)	250.00	
— С.	Full Name (Last, First, Middle Initial) Mr. Robert Pizzutiello, JR		Date of Receipt
	Mailing Address Upstate Medical Physic 1290 Blossom Dr Ste C	es, Inc	M M / D D / Y Y Y Y 05 24 2010
	City	State Zip Code	Transaction ID: 34940451
	Victor	NY 14564-1416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Upstate Medical Physics	Occupation Physicist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		750.00
	TOTAL This Period (last page this line number of		

	D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 113 / 160         (check only one)       11a         X       11a         11b       11c         12       13         13       14
Any informatio or for commerce	n copied from such Reports and cial purposes, other than using th	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
	COMMITTEE (In Full) College of Radiology Asso	ciation Politic	al Action Committee	
Dr. Kathryn				Date of Receipt
Mailing Add	dress 7674 Brandon Rd			05 / 24 / Y Y Y 2010
City		State	Zip Code	Transaction ID: 34940452
New Alba	*	OH	43054-9006	Amount of Each Receipt this Period
	mber of contributing tical committee.	C		250.00
Name of Er Radiology I	mployer nc	Occupation Diagnost	<sup>n</sup> ic Radiologist	
Receipt Fo		Aggregate	e Year-to-Date	
Other	ary General r (specify) <b>▼</b>	0 0	250.00	
Full Name Dr. Daniel D	(Last, First, Middle Initial) DiPrete			Date of Receipt
Mailing Add	dress 380 Ocean Rd			M M / D D / Y Y Y Y 05 24 2010
City		State	Zip Code	Transaction ID: 34940455
	Sett mber of contributing tical committee.	RI C	02882-1390	Amount of Each Receipt this Period 500.00
Name of Er The Imagir	mployer ng Institute	Occupation Diagnost	<sup>n</sup> ic Radiologist	_
Receipt Fo			e Year-to-Date ▼	
Prima Other	ary General r (specify) <b>▼</b>	0 0	500.00	
Full Name Dr. Douglas	(Last, First, Middle Initial)			Date of Receipt
Mailing Add	dress 3100 Tantallon Cir Sl	Ξ		0 5 2 4 2 0 1 0
City	_	State	Zip Code	Transaction ID: 34940456
Hampton		AL	35763-5308	Amount of Each Receipt this Period
	mber of contributing tical committee.	C		500.00
P.C.	mployer of Huntsville,	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
Receipt Fo		Aggregate	e Year-to-Date 🔻	_
Prima Other	ary General r (specify) <b>▼</b>		500.00	
SUBTOTAL	of Receipts This Page (optional)			1250.00
	Period (last page this line number			

	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 114 / 160 (check only one)
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and So or for commercial purposes, other than using the		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
	American College of Radiology Associ	ation Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. John Dubrow		Date of Receipt
	Mailing Address 24 Carroll Cir		05 24 2010
	City	State Zip Code	Transaction ID: 34940457
	Weston	MA 02493-2029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer North Shore Radiological	Occupation	
	Assoc.	Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date	_
	Other (specify) ▼	250.00	
в.	Full Name (Last, First, Middle Initial) Dr. Valerie Jewells		Date of Receipt
	Mailing Address Univ of NC School of N 100 Manning Dr CB 75		05 / 24 / Y Y Y Y 2010
	City	State Zip Code	Transaction ID: 34940459
	Chapel Hill	NC 27599-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer University of NC School	Occupation Neuroradiology	
	of Medicine Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Shawn Meader		Date of Receipt
0.	Mailing Address 302 Harbour Place Dr	Apt 3116	05 24 2010
	City	State Zip Code	Transaction ID: 34940460
	Tampa	FL 33602-6760	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Univ of Florida	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify) ▼	500.00	
ſ	SUBTOTAL of Receipts This Page (optional)		1250.00
ŀ	TOTAL This Period (last page this line number	only)	•

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 115 / 160
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	
	Any information copied from such Reports and St. or for commercial purposes, other than using the	atements ma name and ad	ay not be sold or used by any persol Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Mandar Pattekar			Date of Receipt
	Mailing Address 3121 W War Memorial	Dr		05 24 2010
	City	State	Zip Code	Transaction ID: 34940462
	Peoria	IL	61615-2617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Central Illinois Radiology	Occupatio		_
	Association Receipt For:		tic Radiologist	
	Primary General	Aggregate	e Year-to-Date 🔻	1
	Other (specify)	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Sanjay Shetty			Date of Receipt
	Mailing Address 171 Webster St			M · M         /         D · D         /         Y · Y · Y · Y         Y           0 5         2 4         2 0 1 0
	City	State	Zip Code	Transaction ID: 34940463
	Needham	MA	02494-2409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Massachusetts General Hos-	Occupatio	on tic Radiologist	
	pital Receipt For:		e Year-to-Date 🔻	
	Other (specify) ▼		500.00	]
C.	Full Name (Last, First, Middle Initial) Dr. Mark Bohlman			Date of Receipt
0.	Mailing Address JH Bayview Med Ctr Pa 4940 Eastern Ave	avilion Bldg	) F	05 24 2010
	City	State	Zip Code	Transaction ID: 34940464
	Baltimore	MD	21224-2735	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer John Hopkins	Occupation Diagnost	on tic Radiologist	
	Receipt For:		e Year-to-Date 🔻	
	Other (specify) ▼	0 0	250.00	]
	SUBTOTAL of Receipts This Page (optional)			1000.00
	<b>TOTAL</b> This Period (last page this line number of	only)	P	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 116 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ			
Α.	Full Name (Last, First, Middle Initial) Dr. Richard Strax			Date of Receipt
	Mailing Address 8719 Pasture View Ln			05 / 24 / Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34940652
	Houston FEC ID number of contributing federal political committee.	TX C	77024-7040	Amount of Each Receipt this Period
	Name of Employer Greater Houston Radiology Association		tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Kyle Antes Mailing Address 8200 Walnut Hill Ln			Date of Receipt
	City	State	Zip Code	05 24 2010
	Dallas	TX	75231-4426	Transaction ID: 34940653 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Texas Oncology		Physicist	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 250.00	
C.	Full Name (Last, First, Middle Initial) Dr. Timothy Farrell			Date of Receipt
	Mailing Address 128 Killarney			0 5 2 4 2 0 1 0
	City	State	Zip Code	Transaction ID: 34940655
	Williamsburg FEC ID number of contributing federal political committee.	C	23188-8415	Amount of Each Receipt this Period
	Name of Employer Peninsula Radiology	Occupatio	n tic Radiologist	_
	Receipt For: Primary General Other (specify) ▼	_ <b></b>	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 117 / 160           (check only one)
A oi	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may name and add	/ not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Politic	al Action Committee	
<u>ب</u> ۹.	Full Name (Last, First, Middle Initial) Dr. Gary Gustafson			Date of Receipt
	Mailing Address William Beaumont Hos 44199 Deguindre Rd	spital		05 24 YYYY 05 24 2010
	City	State	Zip Code	Transaction ID: 34940661
	Troy	MI	48085-1128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer William Beaumont Hospital	Occupation Radiation	n n Oncologist	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary   General     Other (specify)	0 0	250.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Wilbur Smith	1		Date of Receipt
	Mailing Address Detroit Receiving Hosp 4201 Saint Antoine St	Rm 3L8		05 / 24 / Y Y Y Y 2010
	City Detroit	State MI	Zip Code	Transaction ID: 34940662
	FEC ID number of contributing federal political committee.	C	48201-2153	Amount of Each Receipt this Period
	Name of Employer Wayne State University	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary   General     Other (specify)	0 0	250.00	
	Full Name (Last, First, Middle Initial) Dr. Gerald Mulligan	I		Date of Receipt
	Mailing Address Marshfield Clinic 1000 N Oak Ave			M M M         /         D D         Y         Y Y         Y         Y           05         /         24         2010
	City	State	Zip Code	Transaction ID: 34940663
	Marshfield FEC ID number of contributing federal political committee.		54449-5702	Amount of Each Receipt this Period 1000.00
	Name of Employer Marshfield Clinic	Occupation	n ic Radiologist	
	Receipt For:	1 · · · · ·	Year-to-Date V	1
	Primary     General       Other (specify) ▼	0 0	1000.00	]
	SUBTOTAL of Receipts This Page (optional)	I		1500.00
	<b>FOTAL</b> This Period (last page this line number		•	

Ary information copied from such Reports and Statements may not be seld or used by any person for the 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.       Data of Receipt         Division Scandon       Date of Receipt         City       State       Zip Code         Havefford       PA       19041-1112         PEC 1D number of contributing tederal political committee       C       Amount of Each Receipt this Period         Primary       General       Occupation       Date of Receipt         Primary       General       Occupation       Occupation         Primary       General       Occupation       Date of Receipt         Mailing Address       8206 Ashworth Ct       Transaction ID: 34940666       Amount of Each Receipt this Period         B.       Dr. Joseph Cerniglano       Date of Receipt       Date of Receipt       Date of Receipt         City       State       Zip Code       Amount of Each Receipt this Period       Date of Receipt         Dr. Joseph Cerniglano       Date of Receipt       Date of Receipt       Date of Receipt       Date of Receipt         Mailing Address       8206 Ashworth Ct       C       Transa	A (FEC Form 3X) CEIPTS	schedule(s) pry of the nary Page	
American College of Radiology Association Political Action Committee         Full Name (Last, First, Middle Initial)         Maing Address       532 College Ave         City       State       Zip Code         Haverford       PA       19041-1112         FEC ID number of contributing federal political committee.       C       Transaction ID: 34940665         Nonunt of Each Receipt Ith Period       Diagnostic Radiologist       Amount of Each Receipt Ith Period         None of Employer       Diagnostic Radiologist       Date of Receipt         Maiing Address       8206 Ashworth Ct       100.0         City       State       Zip Code         Jacksonville       FL       32256-3837         FEC ID number of contributing federal political committee.       C       Transaction ID: 34940666         Aggregate Year-to-Date       Image: Size Size Size Size Size Size Size Size	rposes, other than using the nan	ed by any p al committe	v person for the purpose of soliciting contributions
A.     Dr. Mary Scanton     Date of Receipt       Mailing Address     532 College Ave <ul> <li>Ø.5</li> <li>2.4</li> <li>2.0</li> <li>Transaction ID: 34940665</li> <li>Aggregate Year-to-Date</li> <li>Primary</li> <li>General</li> <li>Obter (specify)</li> <li>State</li> <li>Zip Code</li> <li>Transaction ID: 34940665</li> <li>Amount of Each Receipt His Period</li> <li>Aggregate Year-to-Date</li> <li>Transaction ID: 34940666</li> <li>Amount of Each Receipt His Period</li> <li>Other (specify)</li> <li>State</li> <li>Zip Code</li> <li>Transaction ID: 34940666</li> <li>Aggregate Year-to-Date</li> <li>Transaction ID: 34940666</li> <li>Amount of Each Receipt</li> <li>Date of Receipt His Period</li> <li>Date of Receipt</li> <li>Date of Receipt His Period</li> <li>Date of Receipt</li> <li>Date of Receipt His Period</li> <li></li></ul>	· · · ·	ittee	
Mailing Address       532 College Ave         City       State       Zip Code         Haverford       PA       19041-1112         FEC ID number of contributing federal political committee.       C       Transaction ID: 34940665         Amount of Each Receipt this Period       Occupation       300.00         Name of Employer       Occupation       Diagnostic Radiologist         Aggregate Year-to-Date       ✓       300.00         Full Name (Last, First, Middle Initial)       Dr. Jaseph Cemigliaro       Date of Receipt         Mailing Address       8206 Ashworth Ct       ✓       ✓         City       State       Zip Code       Aggregate Year-to-Date       ✓         Mailing Address       8206 Ashworth Ct       ✓       ✓       ✓         City       State       Zip Code       Aggregate Year-to-Date       ✓         Mailing Address       1031 Jimson Dr SE       ✓       ✓       ✓       ✓         Mailing Address       1031 Jimson Dr SE        ✓	First, Middle Initial)		Date of Receipt
Haverford     PA     19041-1112     Amount of Each Receipt this Period       FEC ID number of contributing federal political committee.     C     300.0       Name of Employer     Diagnostic Radiologist     Aggregate Year-to-Date     Image: Committee State       Primary     General     General     300.0       Other (specify)     General     Occupation       Dr. Joseph Cerrigilaro     Date of Receipt       Mailing Address     8206 Ashworth Ct       City     State     Zip Code       Jacksonville     FL     32256-3637       FEC ID number of contributing federal political committee.     C       Occupation     Diagnostic Radiologist       Receipt For:     Occupation       Diagnostic Radiologist     Amount of Each Receipt this Period       Maing Address     1031 Jimson Dr SE       City     State     Zip Code       Primary     General     Occupation       Diagnostic Radiologist     Aggregate Year-to-Date     Image: Committee       Mailing Address     1031 Jimson Dr SE     Image: Committee       City     State     Zip Code       City     State     Zip Code       City     General     Image: Committee       FeC ID number of contributing     C     Image: Committee       FeC ID	532 College Ave		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.       C       300.0         Name of Employer PVAMC       Occupation Diagnostic Radiologist       300.0         Receipt For: Primary       General Other (specify) ▼       October (specify) ▼       Date of Receipt         Full Name (Last, First, Middle Initial) Dr. Joseph Cernigliaro       Date of Receipt       Date of Receipt         Gity       State       Zip Code       Transaction ID: 34940666         Jacksonville       FL       32256-3637       Amount of Each Receipt His Period         Name of Employer Mayo Clinic       Occupation Diagnostic Radiologist       Date of Receipt         Name of Employer Mayo Clinic       Occupation Diagnostic Radiologist       Date of Receipt         Name of Employer Mayo Clinic       Occupation Diagnostic Radiologist       Date of Receipt         Mailing Address       1031 Jimson Dr SE       State       Zip Code         City       State       Zip Code       Amount of Each Receipt His Period         Mailing Address       1031 Jimson Dr SE       Mailing Address       1031 Jimson Dr SE         City       State       Zip Code       Amount of Each Receipt His Period         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt His Period         Name of Employer       Occupation			Transaction ID: 34940665
federal political committee.       0       300.00         Name of Employer       Occupation       Diagnostic Radiologist         Peceipt For:       Aggregate Year-to-Date ▼       300.00         Full Name (Last, First, Middle Initial)       Dr. Joseph Cernigliaro       Date of Receipt         Mailing Address       8206 Ashworth Ct       0       2.4       2.0.1         City       State       Zip Code       Transaction ID: 349406666         Jacksonville       FL       32256-3637       Amount of Each Receipt this Period         Name of Employer       Occupation       Diagnostic Radiologist       Amount of Each Receipt this Period         Name of Employer       Occupation       Diagnostic Radiologist       Aggregate Year-to-Date       ▼         Mailing Address       1031 Jimson Dr SE       500.00       0       500.00       0         Full Name (Last, First, Middle Initial)       Dr. Mark Bernardy       Date of Receipt       2.4       2.01         Mailing Address       1031 Jimson Dr SE       C       500.00       0       500.00       1000.0         Kity       State       Zip Code       Aggregate Year-to-Date       Mount of Each Receipt this Period       1000.0       1000.0         Kity       State       Zip Code       Aggo			Amount of Each Receipt this Period
PVAMC       Diagnostic Radiologist         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Date of Receipt         Mailing Address       8206 Ashworth Ct         City       State       Zip Code         Jacksonville       FL       32256-3637         FEC ID number of contributing federal political committee.       C       Transaction ID: 34940666         Name of Employer       Occupation       Diagnostic Radiologist         Aggregate Year-to-Date       ▼       500.00         Name of Employer       Occupation       Date of Receipt         Mailing Address       1031 Jimson Dr SE       500.00         FcC ID number of contributing federal political committee.       C       Transaction ID: 34940666         Aggregate Year-to-Date       ▼       500.00       Date of Receipt         Diagnostic Radiologist       Aggregate Year-to-Date       ▼       105 / 24 / 201         Transaction ID: 34940665       Aggregate Year-to-Date       ▼       105 / 24 / 201         City       General       Ga 30013-2064       Transaction ID: 34940665         City       Ga 30013-2064       Amount of Each Receipt ins Period         FEC ID number of contributing federal political committee.<			300.00
Primary       General         Other (specify) ▼       300.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Joseph Cernigliaro       Mailing Address 8206 Ashworth Ct       Date of Receipt         City       State       Zip Code         Jacksonville       FL       32256-3637         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer       Occupation       Diagnostic Radiologist       Aggregate Year-to-Date ▼         Mailing Address       1031 Jimson Dr SE       500.00       Date of Receipt         City       State       Zip Code       Aggregate Year-to-Date ▼         Primary       General       500.00       Date of Receipt         Other (specify) ▼       General       500.00       Transaction ID: 34940667         Aggregate Year-to-Date       Mailing Address       1031 Jimson Dr SE       Mailing Address         City       State       Zip Code       Amount of Each Receipt his Period         General       C       Mailing Address       1031 Jimson Dr SE         City       State       Zip Code       Amount of Each Receipt his Period         FEC ID number of contributing federal political committee.       C       <			
Other (specify) ▼       300.00         Full Name (Last, First, Middle Initial)       Dr. Joseph Cernigliaro         Mailing Address       8206 Ashworth Ct         City       State       Zip Code         Jacksonville       FL       32256-3637         FEC ID number of contributing federal political committee.       C       Transaction ID: 34940666         Name of Employer       Occupation       Diagnostic Radiologist         Receipt For:       Diagnostic Radiologist       Aggregate Year-to-Date ▼         Primary       General       500.00         Other (specify) ▼       Date of Receipt         Mailing Address       1031 Jimson Dr SE       Motion         City       State       Zip Code         Conyers       GA       30013-2064         FEC ID number of contributing federal political committee.       C         Other (specify) ▼       Date of Receipt         Mailing Address       1031 Jimson Dr SE       Transaction ID: 34940667         City       State       Zip Code         Conyers       GA       30013-2064         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         Diagnostic Radiologist       1000.0    <			
Dr. Joseph Cernigliaro       Date of Receipt         Mailing Address       8206 Ashworth Ct         City       State       Zip Code         Jacksonville       FL       32256-3637         FEC ID number of contributing federal political committee.       C       Transaction ID: 34940666         Name of Employer Mayo Clinic       Occupation Diagnostic Radiologist       Amount of Each Receipt this Period         Name of Employer Mayo Clinic       Occupation Diagnostic Radiologist       Date of Receipt         Full Name (Last, First, Middle Initial)       Primary       General       05         Dr. Mark Bernardy       Mailing Address       1031 Jimson Dr SE       Date of Receipt         City       State       Zip Code       Transaction ID: 34940667         Convers       GA       30013-2064       Transaction ID: 34940667         FEC ID number of contributing federal political committee.       C       1000.0         Name of Employer Self-Employed       Occupation Diagnostic Radiologist       1000.0		300.00	
City     State     Zip Code       Jacksonville     FL     32256-3637       FEC ID number of contributing federal political committee.     C       Name of Employer Mayo Clinic     Occupation Diagnostic Radiologist       Receipt For: Primary     Occupation Diagnostic Radiologist       Full Name (Last, First, Middle Initial) Dr. Mark Bernardy     ✓       Mailing Address     1031 Jimson Dr SE       City     State     Zip Code       City     State     Zip Code       City     State     Zip Code       City     State     Zip Code       FEC ID number of contributing federal political committee.     C       Other (specify) ♥     Date of Receipt       Mailing Address     1031 Jimson Dr SE       City     State     Zip Code       Convers     GA     30013-2064       FEC ID number of contributing federal political committee.     C       Name of Employer Self-Employed     Occupation Diagnostic Radiologist	iaro		Date of Receipt
Jacksonville       FL       32256-3637       Hardword Extension         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Mayo Clinic       Occupation Diagnostic Radiologist       500.0         Receipt For: Primary       General Other (specify) ♥       Aggregate Year-to-Date ♥       Date of Receipt         Full Name (Last, First, Middle Initial) Dr. Mark Bernardy       Date of Receipt       Mount of Each Receipt this Period         City       State       Zip Code       Transaction ID: 34940667         Convers       GA       30013-2064       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       1000.0         Name of Employer Self-Employed       Occupation Diagnostic Radiologist       1000.0	8206 Ashworth Ct		
FEC ID number of contributing federal political committee.       C       500.0         Name of Employer Mayo Clinic       Occupation Diagnostic Radiologist       500.0         Receipt For:       Aggregate Year-to-Date ▼       Primary       General Other (specify) ▼       Date of Receipt         City       State       Zip Code Convers       GA 30013-2064       Transaction ID: 34940667         Convers       GA 30013-2064       Amount of Each Receipt this Period Teach Receipt this P			Transaction ID: 34940666
federal political committee.       C       000.0         Name of Employer       Occupation       Diagnostic Radiologist         Receipt For:       Aggregate Year-to-Date ▼         Primary       General       500.00         Other (specify) ▼       Date of Receipt         Full Name (Last, First, Middle Initial)       Dr. Mark Bernardy         Mailing Address       1031 Jimson Dr SE         City       State       Zip Code         Conyers       GA       30013-2064         FEC ID number of contributing federal political committee.       C         Name of Employed       Occupation         Diagnostic Radiologist       1000.0			Amount of Each Receipt this Period
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       500.00         Full Name (Last, First, Middle Initial)       Dr. Mark Bernardy         Dr. Mark Bernardy       Date of Receipt         Mailing Address       1031 Jimson Dr SE         City       State       Zip Code         Convers       GA       30013-2064         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         Diagnostic Radiologist       1000.0			500.00
Primary       General         Other (specify) ▼       500.00         Full Name (Last, First, Middle Initial)       Date of Receipt         Dr. Mark Bernardy       05         Mailing Address       1031 Jimson Dr SE         City       State       Zip Code         Convers       GA       30013-2064         FEC ID number of contributing federal political committee.       C       1000.0         Name of Employer       Occupation       Diagnostic Radiologist			
Other (specify) ▼       500.00         Full Name (Last, First, Middle Initial)       Dr. Mark Bernardy         Dr. Mark Bernardy       Date of Receipt         Mailing Address       1031 Jimson Dr SE         City       State       Zip Code         Conyers       GA       30013-2064         FEC ID number of contributing federal political committee.       C         Name of Employer Self-Employed       Occupation         Diagnostic Radiologist       Diagnostic Radiologist			
Dr. Mark Bernardy       Date of Receipt         Mailing Address       1031 Jimson Dr SE         City       State       Zip Code         Convers       GA       30013-2064         FEC ID number of contributing federal political committee.       C         Name of Employer Self-Employed       Occupation Diagnostic Radiologist		500.00	0
City     State     Zip Code       Convers     GA     30013-2064       FEC ID number of contributing federal political committee.     C       Name of Employer Self-Employed     Occupation Diagnostic Radiologist	First, Middle Initial)		Date of Receipt
Convers     GA     30013-2064       FEC ID number of contributing federal political committee.     Amount of Each Receipt this Period       Name of Employer Self-Employed     Occupation Diagnostic Radiologist	1031 Jimson Dr SE		
FEC ID number of contributing federal political committee.       1000.0         Name of Employer Self-Employed       Occupation Diagnostic Radiologist			
federal political committee.     Image: Committee interval       Name of Employer Self-Employed     Occupation Diagnostic Radiologist			Amount of Each Receipt this Period
			1000.00
	r (		
Receipt For: Aggregate Year-to-Date ▼			
Primary       General         Other (specify)       ▼		1000.00	0
SUBTOTAL of Receipts This Page (optional) 1800.0	eipts This Page (optional)		1800.00
TOTAL This Period (last page this line number only)			

				FOR LINE NUMBER: PAGE 119/160
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
I	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Г				13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associ	iation Politic	al Action Committee	
Z				
A.	Full Name (Last, First, Middle Initial) Dr. Carl Kalbhen			Date of Receipt
	Mailing Address 5728 Butler Ln			M M / D D / Y Y Y Y
	<u></u>	Ctoto	Zin Codo	
	City Long Grove	State II	Zip Code 60047-8243	Transaction ID: 34940669 Amount of Each Receipt this Period
			00047-0243	
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupatio	n	_
	Name of Employer Northwest Radiology Assoc-		tic Radiologist	
	iates Receipt For:	1 · · · · ·	e Year-to-Date V	—
	Primary General	<u> </u>		
	Other (specify)		500.00	
_	Full Nome (Lept. First Middle Initial)			
В.	Full Name (Last, First, Middle Initial) Dr. John Olsen			Date of Receipt
	Mailing Address 4645 Stonehaven Dr			M M / D D / Y Y Y Y
	<u></u>	01-11-	7'- 0 - 1-	05 24 2010
	City Columbus	State OH	Zip Code	Transaction ID: 34940670
			43220-2855	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupatio	n	
	Ohio State University Hos- pital		tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		500.00	
	Other (specify) 🔻			
_	Full Name (Last, First, Middle Initial)	1		
C.	Dr. Manuel Brown			Date of Receipt
	Mailing Address Henry Ford Hospital 2799 W Grand Blvd			05 24 2010
	City	State	Zip Code	Transaction ID: 34940675
	Detroit	MI	48202-2689	Amount of Each Receipt this Period
	FEC ID number of contributing	С		2500.00
	federal political committee.			
	Name of Employer Henry Ford Hospital	Occupatio		
			tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		2500.00	
_				
Γ				2500.00
L	SUBTOTAL of Receipts This Page (optional)			3500.00
ſ	<b>TOTAL</b> This Period (last page this line number	only)		
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 120 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         1
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Elaine Lewis		Date of Receipt
Mailing Address Reading Hospital & PO Box 16052	& Medical Ctr	05 / D D / Y Y Y Y 2010
City	State Zip Code	Transaction ID: 34940679
Reading FEC ID number of contributing federal political committee.	PA 19612-6052	Amount of Each Receipt this Period
Name of Employer West Reading Radiology As- sociates	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  500.00	
Full Name (Last, First, Middle Initial) Dr. Lonnie Simmons		Date of Receipt
Mailing Address Gundersen/Luthera 1900 South Ave Co		M         M         /         D         D         /         Y
City	State Zip Code	Transaction ID: 34940682
La Crosse FEC ID number of contributing federal political committee.	WI 54601-5467	Amount of Each Receipt this Period 83.34
Name of Employer Gundersen Lutheran Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 416.70	
Full Name (Last, First, Middle Initial) Dr. Roger Cronk		Date of Receipt
Mailing Address 1505 Eagle Ridge	Rd NE	05 24 2010
City	State Zip Code	Transaction ID: 34940936
Albuquerque FEC ID number of contributing federal political committee.	NM 87122-1156	Amount of Each Receipt this Period
Name of Employer X-Ray Associates of NM, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional	al)	1083.34
	al)	1083.3

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 121 / 160         (check only one)       I1a         X       11a         13       14         15       16         17		
	Any information copied from such Reports and St or for commercial purposes, other than using the	on for the purpose of soliciting contributions oslicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politic	al Action Committee			
∠ A.	Full Name (Last, First, Middle Initial) Dr. Irving Ehrlich					
	Mailing Address 1727 Cleveland Ave	05 / 24 / Y Y Y Y 05 / 24				
	City	State	Zip Code	Transaction ID: 34940937		
	Wyomissing	PA	19610-2311	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer JIT Winston Radiology Ass- ociates	Occupatio Diagnost	n tic Radiologist			
	Receipt For:	Aggregate	e Year-to-Date V			
	Primary     General       Other (specify) ▼	0 0	500.00	]		
_ В.	Full Name (Last, First, Middle Initial) Dr. Anne P. Dunne			Date of Receipt		
	Mailing Address 102 Andrews Ct	0 5 / D D / Y Y Y Y 2 4 2 0 1 0				
	City	State	Zip Code	Transaction ID: 34940938		
	Lewisburg	PA	17837-6510	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Geisinger Medical Center	Occupatio Diagnost	<sup>on</sup> tic Radiologist			
	Receipt For: Primary General Other (specify) <b>v</b>	Aggregate	e Year-to-Date 🔻 1000.00	]		
– C.	Full Name (Last, First, Middle Initial) Dr. Ellen Tabor			Date of Receipt		
-	Mailing Address West Penn Hospital 4800 Friendship Ave			M M / D D / Y Y Y Y 05 24 2010		
	City	State	Zip Code	Transaction ID: 34940939		
	Pittsburgh	PA	15224-1793	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Allegheny Radiology Assoc- iates	Occupatio Diagnost	<sup>on</sup> tic Radiologist			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_		
	Other (specify) ▼	0 0	250.00			
ſ	SUBTOTAL of Receipts This Page (optional)			1750.00		
ľ	TOTAL This Period (last page this line number of	only)				

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 122 / 160           (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Bruce Hillman			Date of Receipt
	Mailing Address Univ of Virginia PO Box 801339			05 <sup> / D D / Y Y Y Y 24<sup> / 2010</sup></sup>
	City	State	Zip Code	Transaction ID: 34940940
	Charlottesville	VA	22908-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Univ of Virginia	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	1 · · · · · ·	e Year-to-Date V	1
	Primary General Other (specify)	0 0	500.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Dallas Lovelace, III	•		Date of Receipt
	Mailing Address Regional Medical Ctr 3000 Saint Matthews F	Rd		M M / D D / Y Y Y Y 05 / 24 / 2010
	City	State	Zip Code	Transaction ID: 34940942
	Orangeburg FEC ID number of contributing federal political committee.	SC C	29118-1442	Amount of Each Receipt this Period
	Name of Employer Radiology Associates, PA	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary     General       Other (specify) ▼	0 0	1000.00	
- с.	Full Name (Last, First, Middle Initial) Dr. Beverly Coleman	I		Date of Receipt
	Mailing Address Univ of Pennsylvania N 3400 Spruce St	Med Ctr		05 24 Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34940946
	Philadelphia	PA	19104-4206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Hospital of the Univ of PA	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	1	e Year-to-Date ▼	
	Primary     General       Other (specify) ▼	0 0	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)	I		1750.00
ŀ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	() Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 123 / 160           (check only one)         11a         11b         11c         12           13         14         15         16         1				
or for commercial purposes, other than using	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to so					
American College of Radiology Ass	sociation Political Action Committee					
Full Name (Last, First, Middle Initial) Dr. Mark Alson						
Mailing Address 6641 N Forkner Av	05 / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>					
City	State Zip Code	Transaction ID: 34940948				
Fresno	CA 93711-1326	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer Sierra Imaging Associates	Occupation Diagnostic Radiologist					
Receipt For:	Aggregate Year-to-Date V	-				
Primary     General       Other (specify) ▼	275.00	]				
Full Name (Last, First, Middle Initial) Dr. Edward Bluth		Date of Receipt				
Mailing Address Ochsner Foundatio 1514 Jefferson Hwy	/	M M / D D / Y Y Y Y 05 / 24 / 2010				
City	State Zip Code	Transaction ID: 34940951				
<u>New Orleans</u> FEC ID number of contributing federal political committee.	LA 70121-2429	Amount of Each Receipt this Period				
Name of Employer Ochsner Radiology	Occupation Diagnostic Radiologist					
Receipt For:	Aggregate Year-to-Date ▼					
Primary     General       Other (specify) ▼	250.00	]				
Full Name (Last, First, Middle Initial) Dr. Jonathan Luchs		Date of Receipt				
Mailing Address 151 Bristol Dr		M M / D D / Y Y Y Y 05 24 2010				
City	State Zip Code	Transaction ID: 34940952				
Woodbury	NY 11797-3114	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer Winthrop-University Hospi- tal	Occupation Diagnostic Radiologist					
Receipt For:	Aggregate Year-to-Date V					
Primary     General       Other (specify) ▼	500.00	]				
SUBTOTAL of Receipts This Page (optional	al)	825.00				
	ber only)					

	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 1'
or for commercial purposes, other than using	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Ronald Hublall	Date of Receipt	
Mailing Address 11715 Mackey St		05 / 24 / Y Y Y Y 005 / 24 / 2010
City	State Zip Code	Transaction ID: 34940956
Overland Park	KS 66210-1933	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250.00
Name of Employer Hublall Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Yogesh Patel		Date of Receipt
Mailing Address 7563 Pear Tree Ln		M M / D D / Y Y Y Y 05 24 2010
City	State Zip Code	Transaction ID: 34940957
<u>Sylvania</u>	OH 43560-4407	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Consulting Radiologists Corp.	Occupation Diagnostic Radiologist	-
Receipt For:	Aggregate Year-to-Date ▼	-
Primary     General       Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Cynthia Sherry		Date of Receipt
Mailing Address 6615 Glendora Ave	9	M M / D D / Y Y Y Y 05 24 2010
City	State Zip Code	Transaction ID: 34940960
Dallas	TX 75230-5219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Southwest Imaging	Occupation Diagnostic Radiologist	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary     General       Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option)	al)	1000.00
	nber only)	

SCHEDULE	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(che	LINE NUMBER:       PAGE 125 / 160         ck only one)       11a         11a       11b       11c       12         13       14       15       16       17		
Any information cop or for commercial p	ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COM	MITTEE (In Full) lege of Radiology Associatio						
Full Name (Last, Dr. Kathleen War	First, Middle Initial) d			C	Date of Receipt		
Mailing Address	13131 S Longwood Ct		M M / D D / Y Y Y Y 05 24 2010				
City		State	Zip Code	Т	ransaction ID: 34940962		
Palos Park		IL	60464-2184	A	mount of Each Receipt this Period		
FEC ID number federal political c		C			500.00		
Name of Employ Loyola University an Foundation	er ( V Physici-	Occupatior Diagnosti	r c Radiologist				
Receipt For:		Aggregate	Year-to-Date 🔻				
Other (spe	General ecify) <b>▼</b>	0 0	500.00				
B. Dr. Geoffrey Ibbot				C	Date of Receipt		
	Mailing Address MD Anderson Cancer Ctr 7515 Main St Ste 300			L	0 5 / 2 4 / Y Y Y Y 2 0 1 0		
City		State TX	Zip Code		ransaction ID: 34940963		
Houston FEC ID number federal political c		C	77030-4551		amount of Each Receipt this Period		
Name of Employ UT MD Anderso ter	n Concor Con	Occupatior Physicist	1				
Receipt For:		Aggregate	Year-to-Date 🔻				
Other (spe	General cify) <b>▼</b>	0 0	500.00				
Full Name (Last, Dr. Ellen Wolf	First, Middle Initial)				Date of Receipt		
Mailing Address	Montefiore Hospital 111 E 210th St				M M / D D / Y Y Y Y 05 24 2010		
City		State	Zip Code		ransaction ID: 34940964		
Bronx		NY	10467-2490	A	mount of Each Receipt this Period		
FEC ID number federal political c	committee.	C			250.00		
Name of Employ Montefiore Medi			c Radiologist				
Receipt For: Primary	General	Aggregate	Year-to-Date 🔻	_			
Other (spe		0 0	250.00				
SUBTOTAL of Re	Leipts This Page (optional)			•	1250.00		
	d (last page this line number only			,			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 126 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         1
Any information copied from such Reports and or for commercial purposes, other than using t	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. James Tallman			Date of Receipt
Mailing Address 1054 Greymont Cir N	05 24 Y Y Y 05 24 2010		
City	State	Zip Code	Transaction ID: 34940965
Marietta FEC ID number of contributing	GA	30064-1330	Amount of Each Receipt this Period
federal political committee.	C		365.00
Name of Employer Quantum Radiology	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date	
Primary     General       Other (specify) ▼	0 0	365.00	
Full Name (Last, First, Middle Initial) Dr. James Brink			Date of Receipt
Mailing Address Yale Univ Sch of Me 333 Cedar St TE 2-2			0 5 2 4 2 0 1 0
City	State	Zip Code	Transaction ID: 34940966
New Haven	СТ	06510-3206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Yale Univ Sch of Med	Occupatio Diagnost	<sup>n</sup> ic Radiologist	
Receipt For:	×	e Year-to-Date	
Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Dr. Sara Abramson			Date of Receipt
Mailing Address Mem Sloan-Kettering 1275 York Ave	g Cancer Ctr		05 24 2010
City	State NY	Zip Code	Transaction ID: 34940967
New York FEC ID number of contributing federal political committee.	C	10065-6007	Amount of Each Receipt this Period
Name of Employer Mem Sloan Kettering Cancer Ctr	Occupatio Pediatric	n Radiologist	
Receipt For:		e Year-to-Date V	-1
Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)			865.00
TOTAL This Period (last page this line numb			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER:         PAGE 127 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Associ	ation Political Action Co	ommittee	
Α.	Full Name (Last, First, Middle Initial) Dr. Timothy Swan	Date of Receipt		
	Mailing Address 200 N Schmidt Ave	05 24 Y Y Y Y 005 24 2010		
	City	State Zip Code	•	Transaction ID: 34940969
	<u>Marshfield</u>	WI 54449-17	735	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Marshfield Clinic	Occupation Diagnostic Radiologis	st	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		500.00	]
- В.	Full Name (Last, First, Middle Initial) Dr. Burt Weyhing, III			Date of Receipt
	Mailing Address 158 Kenwood Rd			M M         /         D D         /         Y
	City	State Zip Code	•	Transaction ID: 34940970
	Grosse Pointe Farm	MI 48236-35	522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer L. Reynolds & Associates, P.C.	Occupation Diagnostic Radiologis	st	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary     General       Other (specify) ▼		500.00	]
с. -	Full Name (Last, First, Middle Initial) Dr. Deborah Levine			Date of Receipt
	Mailing Address Beth Israel-Deaconess 330 Brookline Ave	Med Ctr		M         M         /         D         D         /         Y
	City	State Zip Code		Transaction ID: 34940971
	Boston	MA 02215-54	400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Beth Israel-Deaconess Med Ctr	Occupation Diagnostic Radiologis	st	
	Receipt For:	Aggregate Year-to-Date	▼	
	Other (specify) ▼		500.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			1500.00
ľ	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 128 / 160           (check only one)         11a         11b         11c         12           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Assoc	iation Politica	al Action Committee	
۷ A.	Full Name (Last, First, Middle Initial) Dr. Cassandra Foens	Date of Receipt		
	Mailing Address Covenant Cancer Trea 200 E Ridgeway Ave	atment Ctr		05 24 Y Y Y Y 05 24 2010
	City	State	Zip Code	Transaction ID: 34940972
	Waterloo IA		50702-5040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer Clinical Radiologists PC	Occupation Badiation	n n Oncologist	
	Receipt For:	1 1	Year-to-Date V	—
	Primary General Other (specify) ▼		2500.00	]
- В.	Full Name (Last, First, Middle Initial) Dr. Venkata Devineni	1		Date of Receipt
	Mailing Address De Paul Cancer Care 12303 De Paul Dr			05 / 24 / Y Y Y Y 2010
	City	State	Zip Code	Transaction ID: 34940973
	<u>St Louis</u>	MO	63044-2588	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self-Employed	Occupation Radiation	า เ Oncologist	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	1000.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Richard Taxin			Date of Receipt
	Mailing Address 5 Hilltop Rd			M M / D D / Y Y Y Y 05 24 2010
	City	State	Zip Code	Transaction ID: 34940974
	Rose Valley	PA	19086-6216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer Southeast Radiology, Ltd.	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	760.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	1		4020.00
┢			•	
	TOTAL This Period (last page this line number	oniy)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 129 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17					
Any information copied from such Reports a or for commercial purposes, other than usin	ny information copied from such Reports and Statements may not be sold or used by any person r for commercial purposes, other than using the name and address of any political committee to s						
NAME OF COMMITTEE (In Full) American College of Radiology As	ssociation Political Action Committee						
Full Name (Last, First, Middle Initial) Dr. Jeffrey Kugel							
Mailing Address 127 Ocean Ave		0 5 / D D / Y Y Y Y 2 4 2 0 1 0					
City	State Zip Code	Transaction ID: 34940984					
Sorrento FEC ID number of contributing federal political committee.	ME 04677-3301	Amount of Each Receipt this Period 250.00					
Name of Employer Spectrum Medical Group	Occupation	-					
Receipt For:	Diagnostic Radiologist           Aggregate Year-to-Date         ▼	-					
Primary     General       Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) Dr. Kevin Bufalino		Date of Receipt					
Mailing Address South Jersey Rad 100 Carnie Blvd		05 / 26 / Y Y Y Y 2010					
City Voorhees	State Zip Code NJ 08043-4512	Transaction ID: 34942051					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00					
Name of Employer South Jersey Rad Assoc PA	Occupation Diagnostic Radiologist						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 500.00						
Full Name (Last, First, Middle Initial) Dr. David Handel		Date of Receipt					
Dr. David Handel Mailing Address 542 S Seaview Av	e	05 26 2010					
City	State Zip Code	Transaction ID: 34942053					
Absecon FEC ID number of contributing federal political committee.	NJ 08205-9751	Amount of Each Receipt this Period 500.00					
Name of Employer Atlantic Medical Imaging	Occupation Diagnostic Radiologist	-					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date  500.00						
SUBTOTAL of Receipts This Page (option	nal)	1250.00					
	mber only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 130 / 160         (check only one)       11a         X       11a       11b         13       14       15       16
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Robert Schmall	Date of Receipt		
	Mailing Address 5025 Deer View Road	05 26 Y Y Y Y 05 26 2010		
	City	State	Zip Code	Transaction ID: 34942054
	Cedar Rapids	IA	52411-7869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Radiology Consultants of Iowa	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	1000.00	]
В.	Full Name (Last, First, Middle Initial) Dr. Michael Rainisch			Date of Receipt
	Mailing Address 880 Stillwater Ct			05 / 27 / Y Y Y Y 05 / 27 / 2010
	City	State	Zip Code	Transaction ID: 34949812
	Weston	FL	33327-2129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of Hollywood	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	500.00	
с.	Full Name (Last, First, Middle Initial) Dr. Benjamin Freedman			Date of Receipt
	Mailing Address 7558 Chester Terrace			05 / 27 / Y Y Y Y 05 / 27 2010
	City	State	Zip Code	Transaction ID: 34949813
	Boca Raton	FL	33433-4154	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Associates of Hollywood	Occupatio Diagnost	n tic Radiologist	
	Receipt For:		e Year-to-Date 🔻	_
	Primary     General       Other (specify) ▼	0 0	250.00	]
	SUBTOTAL of Receipts This Page (optional)	L		1750.00
	<b>TOTAL</b> This Period (last page this line number		•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 131 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         16
A o	ny information copied from such Reports and S r for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Daniel Rozenberg	Date of Receipt		
	Mailing Address 200 Northeast 14th Av	05 27 2010		
	City	State	Zip Code	Transaction ID: 34949814
	Fort Lauderdale	FL	33301-1708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of	Occupation	n ic Radiologist	
	Hollywood Receipt For: Primary General Other (specify)	- I	e Year-to-Date ▼ 500.00	]
	Full Name (Last, First, Middle Initial) Dr. Debra Lau	1		Date of Receipt
	Mailing Address 401 SWEET BAY AVE		05 27 2010	
	City	State	Zip Code	Transaction ID: 34949815
	Plantation	FL	33324-8228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of Hollywood	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
	Full Name (Last, First, Middle Initial) Dr. David Hodge			Date of Receipt
	Mailing Address 1733 Michigan Avenue	Э		05 / Y Y Y Y 05 27 2010
	City	State	Zip Code	Transaction ID: 34949816
	Miami Beach	FL	33139-2416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of Hollywood	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1500.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER:       PAGE 132 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Associ	ation Political Act	ion Committee	
A.	Full Name (Last, First, Middle Initial) DR Samuel Sered	Date of Receipt		
	Mailing Address 5681 Manor Oak Ave.	05 / 27 / Y Y Y 2010		
	City		ip Code	Transaction ID: 34949819
	Fort Lauderdale	<u> </u>	3312-6381	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of Hollywood	Occupation Diagnostic Ra	diologist	_
	Receipt For:	Aggregate Year-		
	Primary     General       Other (specify) ▼		500.00	]
- В.	Full Name (Last, First, Middle Initial) Dr. Ana C. Botero			Date of Receipt
	Mailing Address 10545 Blue Palm St.	05 / D D / Y Y Y Y 05 27 2010		
	City		ip Code	Transaction ID: 34949820
	Plantation	FL 3	3324-8248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of Hollywood	Occupation Radiation Onc	ologist	
	Receipt For:	Aggregate Year-	to-Date 🔻	_
	Primary     General       Other (specify) ▼		500.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Nancy A. Ellerbroek	1		Date of Receipt
	Mailing Address Valley Radiotherapy As 1500 Rosecrans Ave S			M M         /         D D         /         Y
	City		ip Code	Transaction ID: 34949822
	Manhattan Beach	<u>CA</u> 9	0266-3754	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			300.00
	Name of Employer Valley Radiology Associat- es	Occupation Radiation Onc	ologist	
	Receipt For:	Aggregate Year-	to-Date 🔻	
	Primary     General       Other (specify) ▼		300.00	]
ſ	SUBTOTAL of Receipts This Page (optional)		·····	1300.00
F	TOTAL This Period (last page this line number	only)		

l purposes, other than using th OMMITTEE (In Full)	e name and address of any political comm	Date of Receipt Date of Receip
College of Radiology Associated ast, First, Middle Initial) erts, JR Carolina Reg Radiolo PO Box 87488 per of contributing al committee.	gy       State     Zip Code       NC     28304-7488       C     Occupation       Diagnostic Radiologist	M       M       /       D       D       /       Y
erts, JR SS Carolina Reg Radiolo PO Box 87488 per of contributing al committee. Poloyer ional Radiolo- General	State Zip Code NC 28304-7488	M       M       /       D       D       /       Y
PO Box 87488	State Zip Code NC 28304-7488	0 5         1 8         2 0 1 0           Transaction ID:         34949824           Amount of Each Receipt this Period
ber of contributing al committee. ployer ional Radiolo-	NC     28304-7488       C     Occupation       Diagnostic Radiologist	Amount of Each Receipt this Period
per of contributing al committee. ployer ional Radiolo-	C Occupation Diagnostic Radiologist	
al committee.	Occupation Diagnostic Radiologist	
General	Diagnostic Radiologist	
General		
	250.0	00
ast, First, Middle Initial) n		Date of Receipt
ess 110 Stoney Beach Ro	1	0 5 / D D / Y Y Y Y 0 5 1 8 2 0 1 0
	State Zip Code	Transaction ID: 34949828
	WI 54902-7243	Amount of Each Receipt this Period
per of contributing al committee.	C	2500.00
ployer sociates of	Occupation Diagnostic Radiologist	
	Aggregate Year-to-Date V	
general specify) ▼	2500.0	00
ast, First, Middle Initial) bbbs, JR		Date of Receipt
ess 2808 Bellevue Ave		0 5 / D D / Y Y Y Y 0 5 / 1 8 2 0 1 0
	State Zip Code	Transaction ID: 34949829
	GA 30909-3804	Amount of Each Receipt this Period
per of contributing al committee.	C	500.00
oloyer adiology Assoc-	Occupation Diagnostic Radiologist	
	Aggregate Year-to-Date V	]
	500.0	00
speciry) 🔻	1	3250.00
,	General General ♥	General Diagnostic Radiologist Aggregate Year-to-Date ▼

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc Full Name (Last, First, Middle Initial) Dr. Stuart H. Prather, III Mailing Address 9 Conifer Sq	Statements may not be sold or used by any pers ne name and address of any political committee to ciation Political Action Committee State Zip Code	13       14       15       16       17         son for the purpose of soliciting contributions o solicit contributions from such committee.       17         Date of Receipt       05       18       2010
American College of Radiology Asso Full Name (Last, First, Middle Initial) Dr. Stuart H. Prather, III		M M / D D / Y Y Y Y
Dr. Stuart H. Prather, III	State Zip Code	M M / D D / Y Y Y Y
	State Zip Code	M M / D D / Y Y Y Y
	State Zip Code	
City		Transaction ID: 34949830
Augusta	GA 30909-4543	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Brown and Radiology Assoc-	Occupation Diagnostic Radiologist	
iates Receipt For:	Aggregate Year-to-Date V	-1
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Harold Jones, JR		Date of Receipt
Mailing Address 2806 Bellevue Ave		M         /         D         D         /         Y
City	State Zip Code	Transaction ID: 34949831
Augusta	GA 30909-3804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) Dr. Henry Alperin		Date of Receipt
Mailing Address 1 Eagleton Ct		05 18 2010
City	State Zip Code	Transaction ID: 34949832
Augusta	GA 30909-1803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date V	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	1	1500.00
TOTAL This Period (last page this line numb		

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 135 / 160         (check only one)       11a         X       11a         13       14         15       16         17
or for comm	tion copied from such Reports and Si lercial purposes, other than using the DF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Americ	an College of Radiology Associ	ation Politic	al Action Committee	
Full Nam	ne (Last, First, Middle Initial) Bauza			Date of Receipt
Mailing A	Address 3880 Inverness Way			05 18 2010
City		State	Zip Code	Transaction ID: 34949833
<u>Martine</u>	Z	GA	30907-9433	Amount of Each Receipt this Period
	number of contributing olitical committee.	C		500.00
Name of Brown a	Employer nd Associates	Occupation Diagnost	n ic Radiologist	
Receipt I		_ <b>_</b>	Year-to-Date V	
	mary General her (specify) <b>▼</b>	0 0	500.00	
Full Nam Dr. James				Date of Receipt
Mailing A	Address 52 Chigoe Ln			M         M         /         D         D         /         Y
City		State	Zip Code	Transaction ID: 34949834
<u>Appling</u>		GA	30802-3838	Amount of Each Receipt this Period
	number of contributing olitical committee.	C		500.00
	Employer nd Associates	Occupation Diagnost	n ic Radiologist	
Receipt I	For: mary General	Aggregate	Year-to-Date <b>V</b>	_
	her (specify) <b>v</b>		500.00	
	ne (Last, First, Middle Initial) n Gregory Rogers	I		Date of Receipt
Mailing A	Address 3579 Oakmont Ct.			M · M         /         D · D         /         Y · Y · Y · Y         Y           0 5         /         1 8         2 0 1 0
City		State	Zip Code	Transaction ID: 34949835
Martine		GA	30907-9518	Amount of Each Receipt this Period
	number of contributing olitical committee.	C		500.00
Name of Brown a	Employer nd Associates	Occupation Diagnost	<sup>n</sup> ic Radiologist	
Receipt I	For: mary General	Aggregate	Year-to-Date 🔻	_
	her (specify) ▼		500.00	
SUBTOTA	L of Receipts This Page (optional)			1500.00
	is Period (last page this line number of			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER:       PAGE 136 / 160         (check only one)       11a         X       11a       11b         13       14       15       16
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Assoc	iation Political Action C	Committee	
∠ A.	Full Name (Last, First, Middle Initial) Dr. William Brooks, III			Date of Receipt
	Mailing Address PO Box 2172			05 / D D / Y Y Y Y 18 2010
	City	State Zip Coo		Transaction ID: 34949837
	Augusta	GA 30903-	-2172	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown Radiology Associates	Occupation Diagnostic Radiolog	gist	
	Receipt For:	Aggregate Year-to-Dat	e 🔻	_
	Primary     General       Other (specify) ▼		500.00	]
– В.	Full Name (Last, First, Middle Initial) Dr. Huey Bullock	1		Date of Receipt
	Mailing Address 3996 Hammonds Fry			M M / D D / Y Y Y Y 05 18 2010
	City	State Zip Coo	de	Transaction ID: 34949838
	Evans	GA 30809-	-8025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	Occupation Diagnostic Radiolog	gist	
	Receipt For:	Aggregate Year-to-Dat	e 🔻	
	Primary     General       Other (specify) ▼		500.00	
– C.	Full Name (Last, First, Middle Initial) Dr. William Johnson	I		Date of Receipt
	Mailing Address 2839 Lombardy Ct			05 / D D / Y Y Y Y 05 18 2010
	City	State Zip Coo		Transaction ID: 34949839
	Augusta	GA 30909-	-3901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	Occupation Diagnostic Radiolog	gist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Dat	500.00	]
Γ	SUBTOTAL of Receipts This Page (optional)		·····	1500.00
ŀ	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 137 / 160           (check only one)         (check only one)           X         11a         11b         11c         12           13         14         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	son for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
۷ A.	Full Name (Last, First, Middle Initial) Dr. Lawrence Arrington			Date of Receipt
	Mailing Address 137 Lakemont Dr			M M / D D / Y Y Y Y 05 / 18 / 2010
	City	State	Zip Code	Transaction ID: 34949840
	Augusta	GA	30904-3175	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	500.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Larry Wells			Date of Receipt
	Mailing Address 3718 Sapphire Dr	M M / D D / Y Y Y Y 05 / 18 / 2010		
	City	State	Zip Code	Transaction ID: 34949841
	Martinez	GA	30907-9572	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown Radiology Associates	1 · · · ·	tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Michael Longe			Date of Receipt
	Mailing Address 305 River Wind Dr			M M / D D / Y Y Y Y 05 18 2010
	City	State	Zip Code	Transaction ID: 34949889
	North Augusta	SC	29841-6092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	1 · · · · ·	tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		500.00	
ſ	SUBTOTAL of Receipts This Page (optional)			1500.00
ľ	TOTAL This Period (last page this line number	only)		•

ę	SCHEDULE A (FEC Form 3X)	Us	e separate schedule(s)	FOR LINE NUMBER: PAGE 138 / 160 (check only one)
I	TEMIZED RECEIPTS		each category of the failed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be name and address of	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
			ing Onemain	
	American College of Radiology Assoc	lation Political Act	ion Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Robert McKellar			Date of Receipt
	Mailing Address 3 Reid Ct			M M / D D / Y Y Y Y 05 18 2010
	City		ip Code	Transaction ID: 34949890
	Augusta	GA 3	0909-3099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	Occupation	dialogiat	-
	Receipt For:	Diagnostic Rad		
	Primary General			1
	Other (specify)	0 0 0 0	500.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Warren Elam			Date of Receipt
-	Mailing Address 603 High Hampton Dri	ive		M M / D D / Y Y Y Y 05 18 2010
	City	State Z	ip Code	Transaction ID: 34949891
	Martinez	GA 3	0907-9149	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	Occupation		
	Receipt For:	Diagnostic Rad	· ·	
	Primary General	Aggregate Year-	· · · · · · ·	1
	Other (specify)		500.00	
-	Full Name (Last, First, Middle Initial) Dr. Forrest Walker			Date of Receipt
	Mailing Address 918 Johns Rd.			M M / D D / Y Y Y Y 05 18 2010
	City		ip Code	Transaction ID: 34949892
	Augusta	GA 3	0904-6102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Brown and Associates	Occupation Diagnostic Rad	diologist	
	Receipt For:	Aggregate Year-		7
	Primary General Other (specify) ▼		500.00	]
Γ	SURTOTAL of Respire This Page (aptional)	1		1500.00
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	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 139 / 160           (check only one)         11a         11b         11c         12           X         11a         114         15         16         17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Associ	iation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Jeanne Choi-Rosen			Date of Receipt
	Mailing Address 20 Surrey Rd			05 / D D / Y Y Y Y 18 2010
	City	State	Zip Code	Transaction ID: 34949893
	Great Neck	NY	11020-1728	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Long Island Jewish Medical Center	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)	0 0	500.00	]
- В.	Full Name (Last, First, Middle Initial) Dr. Neil Kramer			Date of Receipt
	Mailing Address 1621 Fort Duquesne D	05 18 Y Y Y Y 05 18 2010		
	City	State	Zip Code	Transaction ID: 34949897
	Cherry Hill	NJ	08003-2708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As- sociates	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)     ▼	0 0	500.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. Helaina Semmler	I		Date of Receipt
	Mailing Address 1307 White Horse Rd	Ste A102		05 <sup>1</sup> 8 <sup>2</sup> 2010
	City	State	Zip Code	Transaction ID: 34949898
	Voorhees	NJ	08043-2100	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Jersey Radiology As- sociates	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary     General       Other (specify) ▼	0 0	500.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			1500.00
ľ	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 140 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and So or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Political Action Committee	
۷ A.	Full Name (Last, First, Middle Initial) Dr. William Wolff		Date of Receipt
	Mailing Address 40 Old Pond Rd		05 18 Y Y Y Y 05 18 2010
	City	State Zip Code	Transaction ID: 34949902
	Great Neck	NY 11023-1031	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Self-employed	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date	
	Primary     General       Other (specify)	250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Pamela Otto		Date of Receipt
	Mailing Address UTHSCSA MS 7800 7703 Floyd Curl Dr		05 / 18 / Y Y Y Y 05 / 18
	City	State Zip Code	Transaction ID: 34949903
	San Antonio FEC ID number of contributing federal political committee.	TX 78229-3901	Amount of Each Receipt this Period
	Name of Employer Univ of TX Hith Sci Ctr	Occupation Diagnostic Radiologist	-
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary     General       Other (specify)	500.00	]
- C.	Full Name (Last, First, Middle Initial) Dr. John Reifsteck		Date of Receipt
	Mailing Address Associated Radiologist 1120 Kanawha Blvd E	S	05 18 Y Y Y Y 05 18 2010
	City	State Zip Code	Transaction ID: 34949905
	Charleston	WV 25301-2400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Associated Radiologists Inc	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)	······	1000.00
F	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 141 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions
	American College of Radiology Associ	ation Political Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Alexander Khandji		Date of Receipt
	Mailing Address 2 Woodland Dr		05 18 2010
	City	State Zip Code	Transaction ID: 34949906
	Rye	NY 10580-1037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Columbia Presbyterian Med Ctr	Occupation Diagnostic Radiologist	_
	Receipt For:	Aggregate Year-to-Date ▼	
	<ul> <li>Primary</li> <li>General</li> <li>Other (specify) ▼</li> </ul>	250.00	]
В.	Full Name (Last, First, Middle Initial) Dr. Perry Pernicano		Date of Receipt
	Mailing Address 5146 Birkdale Dr		05 / 18 / Y Y Y Y 05 / 18
	City	State Zip Code	Transaction ID: 34949913
	Ann Arbor	MI 48103-9731	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer University of Michigan Ho- <u>sp</u>	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date	_
	Other (specify)	500.00	
с.	Full Name (Last, First, Middle Initial) Dr. Kristen DeStigter		Date of Receipt
	Mailing Address Fletcher Allen Healthca 111 Colchester Ave	are, Dept of	05 / <sup>Y</sup> Y Y Y 18 2010
	City	State Zip Code	Transaction ID: 34949917
	Burlington	VT 05401-1473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Fletcher Allen Healthcare	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date <b>V</b>	
	<ul> <li>Primary</li> <li>General</li> <li>Other (specify) ▼</li> </ul>	500.00	1
	SUBTOTAL of Receipts This Page (optional)	······	1250.00
ľ	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 142 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions		
	American College of Radiology Associ	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Mark Bernardy			Date of Receipt
	Mailing Address 1031 Jimson Dr SE			05 27 2010
	City	State	Zip Code	Transaction ID: 34950240
	Conyers	GA	30013-2064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	1 <b>-</b>	Year-to-Date V	
	Primary     General       Other (specify)     ▼	0 0	1250.00	]
- B.	Full Name (Last, First, Middle Initial) Dr. Michael Raskin			Date of Receipt
	Mailing Address 144 N Sewalls Point R	05 / P D / Y Y Y Y 2010		
	City	State	Zip Code	Transaction ID: 34950243
	Sewalls Point	FL	34996-6502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Michael M. Raskin, P.A.	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼	0 0	500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Mark LeQuire			Date of Receipt
	Mailing Address 2055 Myrtlewood Dr			05 27 Y Y Y Y 010 D D D D D D D D D D D D D D D D D D
	City	State	Zip Code	Transaction ID: 34950246
	Montgomery	AL	36111-1003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Montgomery Radiology Asso- ciates	Occupation Diagnost	<sup>n</sup> ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)	0 0	250.00	]
ſ	SUBTOTAL of Receipts This Page (optional)			750.00
ľ	TOTAL This Period (last page this line number	only)		

mmercial purposes, other than using t E OF COMMITTEE (In Full) erican College of Radiology Asso Name (Last, First, Middle Initial) ocke Barber ng Address 201 Haines Dr Drestown ID number of contributing ral political committee. e of Employer ology Associates of Jersey primary General Other (specify) ▼ Name (Last, First, Middle Initial)	d Statements may not be sold or used by any persolation the name and address of any political committee to         bociation Political Action Committee         State       Zip Code         NJ       08057-2636         C         Occupation         Diagnostic Radiologist         Aggregate Year-to-Date         \$500.00	Date of Receipt Date of Receip
erican College of Radiology Asso Name (Last, First, Middle Initial) ocke Barber ng Address 201 Haines Dr Drestown ID number of contributing ral political committee. e of Employer ology Associates of Jersey eipt For: Primary General Other (specify) ▼	State       Zip Code         NJ       08057-2636         C       Occupation         Diagnostic Radiologist         Aggregate Year-to-Date	M M M / D D / Y Y Y Y 0 5 2 7 2 0 1 0 Transaction ID: 34950297 Amount of Each Receipt this Period
ocke Barber ng Address 201 Haines Dr Drestown ID number of contributing ral political committee. e of Employer ology Associates of Jersey pipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	NJ     08057-2636       C     Occupation       Diagnostic Radiologist       Aggregate Year-to-Date	M M M / D D / Y Y Y Y 0 5 2 7 2 0 1 0 Transaction ID: 34950297 Amount of Each Receipt this Period
Direstown ID number of contributing ral political committee. e of Employer ology Associates of Jersey pipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	NJ     08057-2636       C     Occupation       Diagnostic Radiologist       Aggregate Year-to-Date	0 5     2 7     2 0 1 0       Transaction ID: 34950297       Amount of Each Receipt this Period
ID number of contributing ral political committee. e of Employer ology Associates of Jersey eipt For: Primary	NJ     08057-2636       C     Occupation       Diagnostic Radiologist       Aggregate Year-to-Date	Amount of Each Receipt this Period
ID number of contributing ral political committee. e of Employer ology Associates of Jersey eipt For: Primary	C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
ral political committee. e of Employer ology Associates of Jersey pipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	250.00
ology Associates of Jersey pipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	Diagnostic Radiologist Aggregate Year-to-Date ▼	
Jersey eipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ Name (Last, First, Middle Initial)		
loy Siragusa		Date of Receipt
ng Address 28 Winding Creek W	lay	05 27 YYYY 010 27 2010
	State Zip Code	Transaction ID: 34950298
rond Beach	FL 32174-6773	Amount of Each Receipt this Period
ID number of contributing ral political committee.	C	250.00
e of Employer ology Associates of ona Beach	Occupation Diagnostic Radiologist	
eipt For: Primary General Other (specify) <b>▼</b>	Aggregate Year-to-Date ▼ 500.00	]
Name (Last, First, Middle Initial) Iichael Brannon		Date of Receipt
ng Address 7 Foxglove Ct		05 27 2010
	State Zip Code	Transaction ID: 34950306
enville	SC 29615-5505	Amount of Each Receipt this Period
ID number of contributing ral political committee.	C	42.00
e of Employer nville Radiology	Occupation Diagnostic Radiologist	
Primary	Aggregate Year-to-Date V	
Primary General Other (specify) ▼	210.00	
	 )	542.00
	iichael Brannon ng Address 7 Foxglove Ct enville ID number of contributing al political committee. e of Employer nville Radiology ipt For: Primary General Other (specify) ▼	iichael Brannon ng Address 7 Foxglove Ct State Zip Code enville SC 29615-5505 ID number of contributing al political committee. e of Employer nville Radiology ipt For: Primary General

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 144 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17	
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions		
	American College of Radiology Associ	ation Political Action Committee		
A.	Full Name (Last, First, Middle Initial) Dr. Jeffrey Hu		Date of Receipt	
	Mailing Address 302 Topwater Ln		05 27 Y Y Y 010 D D D D D D D D D D D D D D D D D D	
	City	State Zip Code	Transaction ID: 34950307	
	Greensboro	NC 27455-3423	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	60.00	
	Name of Employer Greensboro Radiology	Occupation Diagnostic Radiologist		
	Receipt For:	Aggregate Year-to-Date V		
	<ul> <li>Primary</li> <li>General</li> <li>Other (specify) ▼</li> </ul>	300.00		
- B.	Full Name (Last, First, Middle Initial) Dr. James Webb		Date of Receipt	
	Mailing Address 9132 E 101st Pl	05 27 Y Y Y Y 05 27 2010		
	City	State Zip Code	Transaction ID: 34950316	
	Tulsa	OK 74133-6912	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer Univ of Oklahoma Health Sci Ctr	Occupation Diagnostic Radiologist		
	Receipt For:	Aggregate Year-to-Date 🔻		
	Primary     General       Other (specify) ▼	500.00		
- с.	Full Name (Last, First, Middle Initial) Dr. Martin Schwartz		Date of Receipt	
	Mailing Address Radiology Associates of 2090 Columbiana Rd S		05 / 27 / Y Y Y Y 005 / 27 / 2010	
	City	State Zip Code	Transaction ID: 34950317	
	Birmingham	AL 35216-2152	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	100.00	
	Name of Employer Radiology Associates of	Occupation		
	Birmingham, PC Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date	_	
	Primary General			
	Other (specify)	500.00		
ſ	SUBTOTAL of Receipts This Page (optional)	•	410.00	
	TOTAL This Period (last page this line number	only)		
	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sc for each categor Detailed Summa	hedule(s) y of the	FOR LINE NUMBER:       PAGE 145 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       17
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	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used name and address of any political	d by any person to committee to so	for the purpose of soliciting contributions
	American College of Radiology Associ	ation Political Action Commi	ttee	
A.	Full Name (Last, First, Middle Initial) Dr. Richard Redvanly			Date of Receipt
	Mailing Address 4315 Gosford PI			05 27 Y Y Y Y 2010
	City	State Zip Code		Transaction ID: 34950318
	Charlotte	NC 28277-4546		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary     General       Other (specify) ▼		326.00	
- B.	Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl			Date of Receipt
	Mailing Address 939 Quarter Round Ro	ad		05 / P V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 34950319
	Pacolet	SC 29372-3516		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Greenville Radiology, P.A.	Occupation Diagnostic Radiologist		
	Receipt For:	Aggregate Year-to-Date V		
	Primary     General       Other (specify) ▼		500.00	
- C.	Full Name (Last, First, Middle Initial) Dr. James Rawson			Date of Receipt
	Mailing Address Medical College of Ger 1120 15th St BA1414	orgia		05 27 Y Y Y Y 010 D D D D D D D D D D D D D D D D D D
	City	State Zip Code		Transaction ID: 34950322
	Augusta	GA 30912-0006		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Medical College of Georgia	Occupation Diagnostic Radiologist		
	Receipt For: Primary General	Aggregate Year-to-Date V		
	Other (specify) $rightarrow$		416.70	
ſ	SUBTOTAL of Receipts This Page (optional)		····· <b>Þ</b>	223.34
Ī	TOTAL This Period (last page this line number	only)	►	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 146 / 160         (check only one)       (check only one)         X       11a       11b       11c       12         13       14       15       16       17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements ma name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Politic	cal Action Committee	
∠ A.	Full Name (Last, First, Middle Initial) Dr. Mark Wittry			Date of Receipt
	Mailing Address 10525 Concord Schoo	l Rd		0 5 2 7 Y Y Y Y 0 5 0 1 0
	City	State	Zip Code	Transaction ID: 34950324
	Saint Louis	MO	63128-1232	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		85.00
	Name of Employer West County Radiological Group, Inc.	Occupatio Cardiac	on Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)	0 0	425.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Mary Pomeroy			Date of Receipt
	Mailing Address 2625 Rolling Hills Dr			05 <sup>1</sup> /27 <sup>2</sup> YYYY 05 <sup>1</sup> /27 <sup>1</sup> /2010
	City	State	Zip Code	Transaction ID: 34950325
	Monroe	NC	28110-8408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Charlotte Radiology	Occupatio Diagnos	<sup>on</sup> tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	336.00	
- ).	Full Name (Last, First, Middle Initial) Dr. Mark Alson			Date of Receipt
	Mailing Address 6641 N Forkner Ave			05 <sup>1</sup> /27 <sup>1</sup> YYYY 05 <sup>1</sup> /27 <sup>1</sup> /2010
	City	State	Zip Code	Transaction ID: 34950328
	Fresno	CA	93711-1326	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Sierra Imaging Associates	1 · · · · · ·	tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 325.00	7
Г		0 0	0 0 0 0 0 0 0 0	
	SUBTOTAL of Receipts This Page (optional)			177.00
	TOTAL This Period (last page this line number	only)		

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 147 / 160         (check only one)       11a         X       11a         13       14         15       16         17
or for cor	nmercial purposes, other than using the	atements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	E OF COMMITTEE (In Full) rican College of Radiology Associa	ation Politic	al Action Committee	
	lame (Last, First, Middle Initial) fred Mansour. JR			Date of Receipt
	g Address Central LA Imaging Inc 3704 North Blvd Ste A			M M / D D / Y Y Y Y 05 27 2010
City		State	Zip Code	Transaction ID: 34950331
Alexa	andria	LA	71301-3606	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		83.34
Name Centr	e of Employer al LA Imaging Inc.	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
Recei	pt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) <b>v</b>	0 0	416.70	]
	lame (Last, First, Middle Initial) net Storella			Date of Receipt
Mailin	g Address 6515 Fallwind Ln			05 27 Y Y Y Y Y 2010
City		State	Zip Code	Transaction ID: 34950718
<u>Beth</u>	esda	MD	20817-4941	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		40.00
<u>rritt</u>	e of Employer Brover, Christie & Me-	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
Recei	pt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) <b>v</b>	0 0	400.00	
Full N Dr. Er	lame (Last, First, Middle Initial) ic Sax			Date of Receipt
Mailin	g Address 9 Old Sudbury Rd			0 5 3 1 2 0 1 0
City		State	Zip Code	Transaction ID: 35091555
Linco	oln	MA	01773-4807	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		83.34
	e of Employer maging Institute	Occupatio Diagnost	<sup>n</sup> tic Radiologist	
	pt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) <b>v</b>	0 0	416.70	
SUBTO	TAL of Receipts This Page (optional)			206.68
	This Period (last page this line number of		•	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	() Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 148 / 160         (check only one)       11a         X       11a       11b       11c       12         13       14       15       16       1
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
American College of Radiology Ass	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Amy Kirby		Date of Receipt
Mailing Address 5209 Pulchella Dr		05 / D D / Y Y Y Y 2010
City	State Zip Code	Transaction ID: 35091557
Oklahoma City FEC ID number of contributing federal political committee.	OK 73142-6811	Amount of Each Receipt this Period
Name of Employer Eagle Eye Imaging	Occupation Radiology Resident	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Dr. Arthur Sandy Mailing Address 2821 Argyle Rd		Date of Receipt
City	State Zip Code	
Birmingham	AL 35213-3403	Transaction ID: 35091561 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Advanced Imaging Assoc of AL	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Janet Storella		Date of Receipt
Mailing Address 6515 Fallwind Ln		M M / D D / Y Y Y Y 05 11 2010
City	State Zip Code	Transaction ID: 35184120
Bethesda	MD 20817-4941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Drs Grover, Christie & Me- rritt Bossint Far:	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optiona	al)	340.00
TOTAL This Period (last page this line num	iber only)	180474.68

ITEMIZED DISBURSEMENTS       for each category of the image in the i		CHEDULE B (FEC Form 3X)	Use separate schedule(s	)				-	R:				PA	GE	149	/ 160
ar 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)         Sue Myrick For Congress         Malling Address       P.O. Box 37091         City       State         Chy       State         Chy       N.C         Purpose of Disbursement       011         Cardidate Name       011         Rep. Sue Wilkins Myrick       Disbursement For:         Purpose of Disbursement       011         Category:       Y 2 0 1 0 Y         State: NC       Disbursement For:         State: NC       Disbursement For:         State: NC       Disbursement For:         State: NC       Disbursement For:         State: IL       Office Sought:         Yeldotate Initial)       Category         Office Sought:       X House         Primary       X General         Office Sought:       X House         Primary       X General         Purpose of Disbursement       Distursement For:         2010       Y 2 0 1 0 Y         State: IL       Disbursement For: <th>IT</th> <th>EMIZED DISBURSEMENTS</th> <th>for each category of the</th> <th></th> <th>                                       </th> <th>21b</th> <th></th> <th>22</th> <th>X</th> <th></th> <th>L</th> <th></th> <th>1</th> <th></th> <th></th> <th></th>	IT	EMIZED DISBURSEMENTS	for each category of the			21b		22	X		L		1			
Full Name (Last, First, Middle Initial)         Sue Myrick For Congress         Mailing Address       P.O. Box 37091         City       State         City       State         Candidate Name       NC         Purpose of Disbursement       011         Candidate Name       Category/ Type         Office Sought:       X House         State:       NC         District: 09       Disbursement For:         State:       NC         Nume (Last, First, Middle Initial)       Other (specify)         Volunteers For Shimkus       Disbursement For:         Mailing Address       PO Box 5458         City       State:         Purpose of Disbursement       011         Cardidate Name       011         Cardidate Name       2000.00         Purpose of Disbursement       011         Cardidate Name       011         State:       Disbursement For:		for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any politica	ll cor	nn											S
Sue Myrick For Congress       Date of Disbursement         Mailing Address       P.O. Box 37091         City       State       Zip Code         Purpose of Disbursement       011         Candidate Name       Seate         Rep. Sue Wilkins Myrick       Disbursement For:         Office Sought:       X House         President       Disbursement For:         State: NC       District: 09         Full Name (Last, First, Middle Initial)       Volunteers For Shimkus         Mailing Address       PO Box 5458         City       State: Zip Code         Syringfield       LL         Purpose of Disbursement       011         Candidate Name       Regres For Shimkus         Mailing Address       PO Box 5458         City       State: Zip Code         Syringfield       LL         Purpose of Disbursement       011         Candidate Name       President         State: IL       District: 19         Full Name (Last, First, Middle Initial)       Other (specify) ▼         Transaction ID:       34331926         Candidate Name       President         Rogers For Congress       2010         Mailing Address       PO Box 581	/	American College of Radiology Assoc	iation Political Action Comm	ittee	Э											
City       State       Zip Code         Charlotte       NC       28237         Purpose of Disbursement       011         Cardidate Name       Category!         Rep. Sue Wilkins Myrick       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         Preisedent       Other (specify) ▼       State       Zip Code         Full Name (Last, First, Middle Initial)       Other (specify) ▼       Amount of Each Disbursement         Maling Address       PO Box 5458       City       Transaction ID:       34331925         Purpose of Disbursement       011       Category!       Y       2000.00         City       State       Zip Code       Transaction ID:       34331925         Purpose of Disbursement       011       Category!       Y       2000.00         Office Sought:       X House       Disbursement For:       2010       Amount of Each Disbursement this Peric         Office Sought:       X House       Disbursement For:       2010       Chrer (specify)       Transaction ID:       34331926         Date of Disbursement       Other (specify)       X General       Other (specify)       Transaction ID:       34331926         Date of Disbursement		Sue Myrick For Congress						Date	of D		urse	eme	ent			۲ <sup>۲</sup>
Charlotte       NC       28237         Purpose of Disbursement       011         Candidate Name       Senate         Prep. Sue Wilkins Myrick       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         Full Name (Last, First, Middle Initial)       Volunteers For Shinkus       Transaction ID:       34331925         City       State       Zip Code       Amount of Each Disbursement         Syringfield       IL       62705       Amount of Each Disbursement         Office Sought:       Y 2 0 1 0       X       Amount of Each Disbursement         Office Sought:       Senate       Disbursement For:       2010         Gradidate Name       President       Other (specify) ▼       Amount of Each Disbursement         Office Sought:       X House       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         Gategory/       Transaction ID:       34331926       Date of Disbursement         Office Sought:       X House       Disbursement For:       2010       0/5 *       2 2 0 1 0         Mailing Address       PO B		Mailing Address P.O. Box 37091						0.5			2	2		2	.01	<b>,</b>
011 Cardidate Name Rep. Sue Wilkins Myrick       011 Category/ Type         Office Sought:       X House Senate       Disbursement For: 2010 Primary X General Other (specify) ▼         Full Name (Last, First, Middle Initial)       Other (specify) ▼         Volunteers For Shimkus       011 Category/ Type         Mailing Address       PO Box 5458         City       State         President       011 Category/ Type         Office Sought:       X House         Disbursement       011 Category/ Type         Office Sought:       X House         Disbursement       011 Category/ Type         Office Sought:       X House         Disbursement       011 Category/ Type         Office Sought:       X House         Disbursement For:       2010         Office Sought:       X House         Disbursement       011 Category/ Type         Full Name (Last, First, Middle Initial) Rogers For Congress       Disbursement For:         Mailing Address       PO Box 581 Post Office Box 581 President         City       Senate President       011 Category/ Type         Office Sought:       X House President       Disbursement For:         Candidate Name Rep. Michael J. Rogers       Disbursement For:       201 Category/ Type		Charlotte		1				Amou	int o	of Ea	ach	Dis	sburse	-		
Rep. Sue Wilkins Myrick       Type         Office Sought:       X House       Disbursement For:       2010         State: NC       District: 09       Other (specify) ▼       Transaction ID:       34331925         Full Name (Last, First, Middle Initial)       Volunteers For Shimkus       Transaction ID:       34331925         City       State: Zip Code       Amount of Each Disbursement this Peric         Springfield       IL       62705         Purpose of Disbursement       011         Candidate Name       Senate       President         President       011       Category/         State: IL       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         State: IL       District: 19       Disbursement For:       2010         Full Name (Last, First, Middle Initial)       Rogers For Congress       Transaction ID:       34331926         Mailing Address       PO Box 581       Amount of Each Disbursement His Peric         City       State: IL       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         Office		·			_			L.						20	00.00	<b>,</b>
State: NC       District: 09         Full Name (Last, First, Middle Initial)       Volunteers For Shimkus         Mailing Address       PO Box 5458         City       State: Zip Code         Springfield       IL         Purpose of Disbursement       011         Cardidate Name       President         President       011         Cardidate Name       President         President       011         Cardidate Name       President         President       Other (specify)         Office Sought:       X         Mailing Address       PO Box 581         President       Other (specify)         State: IL       District: 19         Full Name (Last, First, Middle Initial)       Rogers For Congress         Mailing Address       PO Box 581         Post Office Box 581       Other (specify)         Grige Sought:       X         Mailing Address       PO Box 581         Purpose of Disbursement       011         Category/ Brighton       MI         Milling Address       PO Box 581         City       Senate       Other (specify)         State: IM       District: 08         Subtrottal of Disbursement For:																
Full Name (Last, First, Middle Initial)       Transaction ID: 34331925         Volunteers For Shimkus       Date of Disbursement         City       State       Zip Code         Springfield       IL       62705         Purpose of Disbursement       011         Candidate Name       Category/ President       2000.00         State: IL       Disbursement For:       2010         Office Sought:       X House       Disbursement For:       2010         State: IL       District: 19       Disbursement For:       2010         Full Name (Last, First, Middle Initial)       Regers For Congress       Transaction ID: 34331926         Mailing Address       PO Box 581       Date of Disbursement         Office Sought:       X House       Disbursement For:       2010         President       Other (specify)       Y       2 0 1 0         Mailing Address       PO Box 581       Amount of Each Disbursement this Peric         Other (specify)       State       2010         City       State       Disbursement For:       2010         City       State       Disbursement For:       2010         Candidate Name       Senate       Disbursement For:       2010         State: MI       District:		Senate President	Primary X General	•												
Volunteers For Shimkus       Mailing Address       PO Box 5458         Mailing Address       PO Box 5458       0 5 <sup>M</sup> / <sup>D</sup> 1 <sup>B</sup> / <sup>X</sup> 2 0 1 0 <sup>Y</sup> City       State       Zip Code         Purpose of Disbursement       011         Candidate Name       011         Rep. John M. Shimkus       011         Office Sought:       X House       Disbursement For:         Office Sought:       X House       Disbursement For:         State: IL       District: 19       Primary         Full Name (Last, First, Middle Initial)       Regers For Congress         Mailing Address       PO Box 581         Post Office Box 581       011         City       State       Zip Code         Brighton       MI       48116         Purpose of Disbursement       011         Cadegory/ Type       011         Office Sought:       X House         Senate       Disbursement For:         2010       011         Cadegory/ Type       Amount of Each Disbursement this Perid         Office Sought:       X House         Senate       Disbursement For:         2010       X Primary         General       011         Category/ Type								<b>-</b>					1001			
City       State       Zip Code         Springfield       IL       62705         Purpose of Disbursement       011         Candidate Name       Rep. John M. Shinkus       011         Office Sought:       X       House       Disbursement For:       2010         Office Sought:       X       House       Disbursement For:       2010         State:       IL       District: 19       It       Category/         Full Name (Last, First, Middle Initial)       Rogers For Congress       Transaction ID:       34331926         Mailing Address       PO Box 581       Other (specify) ▼       Amount of Each Disbursement this Perid         City       State       Zip Code       Amount of Each Disbursement this Perid         Purpose of Disbursement       011       Category/       Y 2 0 1 0         City       State       Zip Code       Amount of Each Disbursement this Perid         Purpose of Disbursement       011       Category/       Type         Office Sought:       X House       Disbursement For:       2010         Category/       Type       Other (specify) ▼       Amount of Each Disbursement this Perid         Office Sought:       X House       Disbursement For:       2010       Amount of Each Disbu								Date	of D		urse	eme	ent			Y
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Candidate Name       Category/ Type         Category/ Rep. John M. Shimkus       Disbursement For: 2010         Office Sought:       X House         Senate       President         Other (specify)       Image: Category/ Type         State: IL       District: 19         Full Name (Last, First, Middle Initial) Rogers For Congress       Transaction ID: 34331926 Date of Disbursement         Mailing Address       PO Box 581 Post Office Box 581         City       State       Zip Code Brighton         Purpose of Disbursement       011 Category/ Type         Candidate Name Rep. Michael J. Rogers       Disbursement For: 2010 Senate       2010 Disbursement For: 2010 Senate         Office Sought:       X House President       Disbursement For: 2010 Senate       2010 Other (specify)         State: MI       District: 08       Michael J. Rogers       4500.00         SubbrotAL of Disbursements This Page (optional)       4500.00		Purpose of Disbursement			6			L.						20	00.00	)
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Rogers For Congress       Date of Disbursement         Mailing Address       PO Box 581 Post Office Box 581         City       State       Zip Code Brighton         Purpose of Disbursement       011 Category/ Type         Candidate Name Rep. Michael J. Rogers       011 Disbursement For: 2010         Office Sought:       X House President       Disbursement For: 2010         State: MI       District: 08								Trans	sacti	ion	ID:	3	34331	926	3	
Post Office Box 581         City       State       Zip Code         Brighton       MI       48116         Purpose of Disbursement       011         Candidate Name       Disbursement For:       2010         Office Sought:       X       House       Disbursement For:       2010         Senate       President       Other (specify)        4500.00         SUBTOTAL of Disbursements This Page (optional)       4500.00		Rogers For Congress						Date	of D		urse	eme	ent			_
Brighton       MI       48116         Purpose of Disbursement       011         Candidate Name       011         Candidate Name       011         Candidate Name       011         Rep. Michael J. Rogers       011         Office Sought:       X         Y       General         President       Other (specify)         State: MI       District: 08         SUBTOTAL of Disbursements This Page (optional)       4500.00         TOTAL This Period (last page this line number only)									м		<sup>D</sup> 2	<sup>D</sup> 7	/ Y	Ż	0 ľ	`C
Purpose of Disbursement       011         Candidate Name Rep. Michael J. Rogers       011         Office Sought:       X         House       Disbursement For:         Senate       Y         President       Other (specify)         State: MI       District: 08         SUBTOTAL of Disbursements This Page (optional)       4500.00								Amou	int o	of Ea	ach	Dis	sburse	mer	it this	Perioc
Candidate Name       Category/ Type         Rep. Michael J. Rogers       Disbursement For: 2010         Office Sought:       X       Primary         Senate       President         President       Other (specify)         State: MI       District: 08         SUBTOTAL of Disbursements This Page (optional)       4500.00         TOTAL This Period (last page this line number only)       ►					_									5	00.00	)
Office Sought:       X       House       Disbursement For:       2010         Senate       Primary       General         President       Other (specify)       ▼         State: MI       Disbursements This Page (optional)       ▲         SUBTOTAL of Disbursements This Page (optional)       ▲         TOTAL This Period (last page this line number only)       ▲				C	at	egory/										
SUBTOTAL of Disbursements This Page (optional)       4500.00         TOTAL This Period (last page this line number only)       •		Senate President	X Primary General	1		- •										
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	)	FOR LINE	-	R:			PAC	ΞE	150 /	160
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American College of Radiology Associa	ation Political Action Comm	ittee									
Full Name (Last, First, Middle Initial) Rogers For Congress				Transa Date o		sburse	ement	319		×	Y
Mailing Address PO Box 581 Post Office Box 581				0 5		□2	7	Ľ	2(	Dľ0	
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Candidate Name Rep. Michael R. Pence			egory/ ype								
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Full Name (Last, First, Middle Initial) Pat Meehan For Congress				<b>Transa</b> Date o				598	47		
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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of stolling contributions from such committee         Any End of commendation propess, 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)         Gity       State         Mailing Address       PO Box 9639         City       State         Purpose of Disbursement       011         Candidate Name       Disbursement For:         Rep. Brett Guthrie       Disbursement For:         Office Sought:       X House         Disbursement       011         Candidate Name       Association Distrement for:         State: KY       Disbursement For:         Office Sought:       X House         Disbursement       011         Candidate Name       4580 Macarthur Boulevard         Suite 500       State: CA         Office Sought:       X House         Disbursement       011         Candidate Name       4580 Macarthur Boulevard         Reports and bisbursement       011         Candidate Name       Sonate <t< th=""><th>SCHEDULE B (FEC For ITEMIZED DISBURSEM</th><th>ENTS for each Detailed</th><th>parate schedule(s) category of the d Summary Page</th><th>FOR LINE (check only 21b 27</th><th>one) 22 X 23 28a 28b</th><th>PAGE         154 / 160           24         25         24           28c         29         30</th></t<>	SCHEDULE B (FEC For ITEMIZED DISBURSEM	ENTS for each Detailed	parate schedule(s) category of the d Summary Page	FOR LINE (check only 21b 27	one) 22 X 23 28a 28b	PAGE         154 / 160           24         25         24           28c         29         30
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Dent PAC Mailing Address P.O. Box 40385 City State			
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Full Name (Last, First, Middle Initial) Whitfield For Congress Committee Mailing Address P.O. Box 391			Transaction ID: $34748951$ Date of Disbursement 05 / $13$ / $2010$
City State Hopkinsville KY	Zip Code 42241		Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial) Kevin Mccarthy For Congress			Transaction ID: 34749006 Date of Disbursement
Mailing Address P.O. Box 12667			$ \begin{array}{c} \begin{array}{c} M \\ 0 \\ 5 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \begin{array}{c} \\ \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} \\ \end{array} $
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SUBTOTAL of Disbursements This Page (optional)		····· <b>Þ</b>	10500.00

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Any Internation capied from such Reports and Statements may not be soft or used by any person for the purpose of soliciting contributions irrem such committee         NAME OF COMMITTEE (in Full)         American College of Radiology Association Political Action Committee         Will Name (Last, First, Middle Initial)         Wilch For Congress         Malling Address       PO Box 1682         Cilly       State         Purpose of Disbursement       011         Cardidate Name       011         Cardidate Name       Senate         Purpose of Disbursement       011         City       Senate         Disbursement       011         Cardidate Name       President         Disbursement For:       2010         Y       Other (specify)         Bar For Congress       Transaction ID: 34921719         Date of Disbursement for:       2010         City       Senate         Purpose of Disbursement       011         Cardidate Name       Gargory/ Type         Office Sought:       X House         Disbursement For:       2010         X       House         Senate       Gargory/ Type         Office Sought:       X House         Disbursement		CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	NUMBER:     PAGE     157 / 160       / one)     22     X     23     24     25     26       28a     28b     28c     29     30
✓       Full Name (Last, First, Middle Initial)         Welch For Congress       Transaction ID: 34753540         Mailing Address       PO Box 1682         Chy       State       Zip Code         Purpose of Disbursement       011         Candidate Name       011         Candidate Name       President         State: VT       District: 01         District: 01       District: 01         Mailing Address       Post Office Box 582496         Chy       State         Zip Code       Amount of Each Disbursement         Ø 5 <sup>(a)</sup> 1 2 1         Ø 5 <sup>(a)</sup> 2 1 0         State: VT       District: 01         District: 01       Other (specify)         Bera For Congress       District: 01         Mailing Address       Post Office Box 582496         Chy       State       Zip Code         Purpose of Disbursement       011         Candidate Name       011         Amerifish Bera       Disbursement For:       2010         Candidate Name       Disbursement For:       2010         General       President       State       Zip Code         Full Name (Last, First, Middle Initial)       Freeident <td< th=""><th></th><th>for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)</th><th>me and address of any politica</th><th>d by any person f I committee to so</th><th>or the purpose of soliciting contributions</th></td<>		for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	me and address of any politica	d by any person f I committee to so	or the purpose of soliciting contributions
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SCHEDULE B (FEC Form	Use separate schedule(s	FOR LINI	E NUMBER:	ŀ	PAGE	158 / 1	160
ITEMIZED DISBURSEMEN	for each category of the Detailed Summary Page	21b 27	22 X 2	3 24 3b 28	c	25 29	20
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American College of Radiology A	ssociation Political Action Comm	ittee					
/ Full Name (Last, First, Middle Initial) Leadership in the New Century (I			Transaction Date of Disb		21725		
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Mailing Address 818 Connecticu	t Avenue NW Ste. 110		0.5	21	~	010	
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State: District:							
Full Name (Last, First, Middle Initial) Democratic Congressional Camp	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee						
Mailing Address 430 South Cap 2nd Floor	tol Street Southeas		0 5 /	<sup>D</sup> 2 7 /	° ²	οìο	) <sup>Y</sup>
City Washington	State Zip Code DC 20003		Amount of E	ach Disbur	sement	t this F	Period
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Full Name (Last, First, Middle Initial) Democratic Congressional Camp	ı aign Committee		Transaction Date of Disb		31339		
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9	SCHEDULE B (FEC Form 3	SX)	FOR LINE	NUMBER: PAGE 159 / 160
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		Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
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Ľ A.	Full Name (Last, First, Middle Initial) Charles Boustany Jr Md For Cong	iross Inc		Transaction ID: 34931342 Date of Disbursement
	Mailing Address PO Box 80126			$\begin{array}{c c} M & M \\ \hline 0 & 5 \\ \hline \end{array} & \begin{array}{c} D \\ 2 \\ \hline \end{array} & \begin{array}{c} D \\ 2 \\ \hline \end{array} & \begin{array}{c} D \\ 7 \\ \hline \end{array} & \begin{array}{c} Y \\ 2 \\ \hline \end{array} & \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 0 \\ \end{array} \\ \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 0 \\ \end{array} \\ \begin{array}{c} Y \\ 2 \\ 0 \\ 1 \\ 0 \\ \end{array} \\ \begin{array}{c} Y \\ Y $
	City Lafayette	State Zip Code LA 70598		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1500.00
	Candidate Name Rep. Charles W. Boustany, Jr.		Category/ Type	
	Office Sought: X House Senate President State: LA District: 07	Disbursement For: 2010 Primary X General Other (specify) ▼		
в.	Full Name (Last, First, Middle Initial) National Republican Senatorial C	ommittee		Transaction ID: 34942138 Date of Disbursement
	Mailing Address 425 Second Stre	eet Northeast		$ \begin{array}{c} \stackrel{\text{M}}{\text{05}} \stackrel{\text{M}}{\text{5}} \stackrel{\text{I}}{\text{5}} \stackrel{\text{D}}{\text{27}} \stackrel{\text{D}}{\text{7}} \stackrel{\text{I}}{\text{7}} \stackrel{\text{V}}{\text{2010}} \stackrel{\text{V}}{\text{10}} \stackrel{\text{V}}{\text{7}} \end{array} $
	City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
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	Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
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SUBTOTAL of Disbursements This Page (optional)	•	6500.00
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	SCHEDULE B (FEC Form 3X)		Use separate schedule(s)			FOR LINE (check only			NUMBER: y one)					PAGE 160 / 160			
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Α.		Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 27025							Transaction ID: $35181735$ Date of Disbursement								
		City Richmond		State VA	Zip Code 23261-7025	5			Ar	noun	t of	Each	Dis	burser			eriod
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SUBTOTAL of Disbursements This Page (optional)	•	459.89
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