

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 09/01/2018 through 09/30/2018

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

Type or Print Name of Treasurer Signature of Treasurer Debnar, Steven, , , [Electronically Filed] Date 10/15/2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2018"/> | <input type="text" value="37455.95"/> | <input type="text" value="37455.95"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="58440.03"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="24173.14"/> | <input type="text" value="642716.16"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="82613.17"/> | <input type="text" value="680172.11"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="65305.74"/> | <input type="text" value="662864.68"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="17307.43"/> | <input type="text" value="17307.43"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 22062.06 | 574343.76 |
| (ii) Unitemized | 2111.08 | 57372.40 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 24173.14 | 631716.16 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 24173.14 | 631716.16 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 11000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 24173.14 | 642716.16 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 24173.14 | 642716.16 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 805.74 | 14864.68 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 805.74 | 14864.68 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 64500.00 | 621000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 27000.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 65305.74 | 662864.68 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 65305.74 | 662864.68 |

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 24173.14 | 631716.16 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 24173.14 | 631716.16 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 805.74 | 14864.68 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 805.74 | 14864.68 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 36 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

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

A. Anders, John, Paul, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4370 Bonnie Brook Rd
 City Ottawa Hills State OH Zip Code 43615-2302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Anders Dermatology Inc. Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2018
Transaction ID : 9A366FCFEB14F1B16E
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Andrews, Tricia, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 San Juan Cir
 City Ponte Vedra Beach State FL Zip Code 32082-1317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jacksonville Dermatology Assoc, PL Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt 09 / 14 / 2018
Transaction ID : 4C4BA59D9594FC103C9D
 Amount of Each Receipt this Period 41.67
 Memo Item

C. Bartus, Cynthia, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1634 Finches Garden Rd
 City Bethlehem State PA Zip Code 18015-1907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Advanced Dermatology Associates Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2018
Transaction ID : 0D69B9E5-964B-4A14-
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 791.67 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Berberian, Brenda, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11003 Cedarwood Dr
 City North Bethesda State MD Zip Code 20852-3460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2018
Transaction ID : 8E476BB40A619E2876F
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Bock, Gerald, Neil, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1617 Saint Marks Plz Ste C
 City Stockton State CA Zip Code 95207-6423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) California Skin Laser Center Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 09 / 19 / 2018
Transaction ID : 47E7ADCF9779CC076296
 Amount of Each Receipt this Period 83.33
 Memo Item

C. Braudis, Kara, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5507 Carrick Ct
 City Columbia State MO Zip Code 65203-5156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Univ of Missouri Dept of Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 624.99

Date of Receipt 09 / 18 / 2018
Transaction ID : 4A948B248092FCFE3F6B
 Amount of Each Receipt this Period 208.33
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 791.66 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Brennan, Christina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1750 Tree Blvd
Ste 1

City Saint Augustine State FL Zip Code 32084-5719

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

Name of Employer (for Individual) Towne Centre for Dermatology Occupation (for Individual) Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 09 / 07 / 2018
Transaction ID : AA0D3F30-B0E4-4602-

Amount of Each Receipt this Period
500.00

Memo Item

B. Burns, Carrine, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 Lincoln Street Aly
6

City Lewiston State ME Zip Code 04240-7747

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

Name of Employer (for Individual) Bates Mill Dermatology Occupation (for Individual) Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 09 / 07 / 2018
Transaction ID : A044D23F-DB55-4D7E-

Amount of Each Receipt this Period
1000.00

Memo Item

C. Chanda, Joseph, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 Silver Palm Ave

City Melbourne State FL Zip Code 32901-3143

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 09 / 11 / 2018
Transaction ID : 5AAA99E8-B737-486D-

Amount of Each Receipt this Period
500.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 9 OF 36 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Collyer, James, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 Mercer St
 City Seattle State WA Zip Code 98109-4324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Modern Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2018
Transaction ID : 10BC5087-7157-42F1-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Donnelly, James, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 S Woods Mill Rd Ste 710N
 City Chesterfield State MO Zip Code 63017-3651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Associates in Dermatology and Cutaneou Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2018
Transaction ID : 9F931EE5-8E50-4EBB-
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Downes, Heather, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 Waukegan Rd Ste 304
 City Bannockburn State IL Zip Code 60015-1836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lake Forest Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 05 / 2018
Transaction ID : F6F72287514A03BE14B
 Amount of Each Receipt this Period 30.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 780.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Elston, Dirk, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Rutledge Ave
 Dept of Dermatology & Dermatologic
 City Charleston State SC Zip Code 29425-8903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Medical Univ of South Carolina Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2018
Transaction ID : A387EBB2-5D52-414B-
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Fangman, William, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5125 Woodland Bay Dr
 City Belmont State NC Zip Code 28012-8881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Piedmont Plastic Surgery and Dermatolo Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 02 / 2018
Transaction ID : FB8E8646-81FE-47A9-
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Fromowitz, Jeffrey, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 951 Jasmine Dr
 City Delray Beach State FL Zip Code 33483-4705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology of Boca Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 282.26

Date of Receipt 09 / 19 / 2018
Transaction ID : 4A4DA1C0EAE4FDAEA41E
 Amount of Each Receipt this Period 10.42
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 560.42 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 11 OF 36 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. Greenberg, Michael, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 Suffield Ter
 City Northbrook State IL Zip Code 60062-3014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Illinois Dermatology Institute, LLC Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 04 / 2018
Transaction ID : 4A3DA4BDD995414D390C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Gross, Alexander, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 Spalding Club Ct
 City Dunwoody State GA Zip Code 30338-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Georgia Dermatology Center Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 05 / 2018
Transaction ID : 97BCA9740AEF1C81514
 Amount of Each Receipt this Period 458.33
 Memo Item

C. Haas, Ann, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8466 Scenic Vista Way
 City Fair Oaks State CA Zip Code 95628-3869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ft Sutter Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt 09 / 30 / 2018
Transaction ID : 4301911651BEDCD9DB3A
 Amount of Each Receipt this Period 125.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 633.33 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Hines, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Milford St
 Ste 301
 City Salisbury State MD Zip Code 21804-6962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peninsula Dermatology Assoc. PA Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 749.97

Date of Receipt 09 / 30 / 2018
Transaction ID : 4F96B7368962724D949E
 Amount of Each Receipt this Period 83.33
 Memo Item

B. Johnston, Kay, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3459 Allison Pl
 City The Villages State FL Zip Code 32163-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bel-Ami Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.16

Date of Receipt 09 / 06 / 2018
Transaction ID : 4F62BEBACACB4EAA6DEA:
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Kannler, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 E Bare Hill Rd
 City Harvard State MA Zip Code 01451-1852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEDA Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2018
Transaction ID : 3DD375DE56D744CFCA4
 Amount of Each Receipt this Period 500.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 613.33 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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

A. Kay, Donald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1750 El Camino Real
 Ste 206
 City Burlingame State CA Zip Code 94010-3214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peninsula Dermatology Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2018
Transaction ID : 42E83E54-4ECD-4317-
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Kovach, Bradley, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 21st Ave S
 City Naples State FL Zip Code 34102-7610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Florida Coastal Dermatology Associates Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2018
Transaction ID : C35151E87EC0A22F63C
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Marchetti, Michael, Armando, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 E 60th St
 Rm 4302
 City New York State NY Zip Code 10022-1096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Memorial Sloan Kettering Cancer Center Occupation (for Individual) Assistant Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2018
Transaction ID : 17B1C396-F577-4361-
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Massey, Paul, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 S Huntington Ave
 Unit 234
 City Jamaica Plain State MA Zip Code 02130-4800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brigham & Women's Hospital Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2018
Transaction ID : 4D082162-2484-4FD1-
 Amount of Each Receipt this Period 150.00
 Memo Item

B. McAllister, Josephine, Chu, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2333 N Triphammer Rd
 Ste 203
 City Ithaca State NY Zip Code 14850-1075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates of Ithaca Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2018
Transaction ID : 5387EDEF-A5AC-4292-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. McClelland, Matthew, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24400 SW Gage Rd
 City Wilsonville State OR Zip Code 97070-9723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Providence Medical Group-Bridgeport Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 06 / 2018
Transaction ID : 9E012468-3ECC-4CAA-
 Amount of Each Receipt this Period 500.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1150.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Menter, Alan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 Junius St
 Ste 145
 City Dallas State TX Zip Code 75246-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baylor University Medical Center Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2018
Transaction ID : BE70F843-C1A0-4ADB-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Paghdal, Kapila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 Hudson Pl
 City Bloomfield State NJ Zip Code 07003-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northern Burgen Dermatology Group Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 10 / 2018
Transaction ID : E2A07F46-80DE-45CD-
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Panuncialman, Jaymie Fe, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 Summit Ave
 City Bangor State ME Zip Code 04401-5631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Penobscot Valley Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2018
Transaction ID : 285E921D98DF5A2E22E
 Amount of Each Receipt this Period 250.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 36 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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

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

A. Patel, Gopal, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 176 S New Middletown Rd
 Ste 203
 City Media State PA Zip Code 19063-5255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Aesthetic Derm Associates Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 852.00

Date of Receipt 09 / 29 / 2018
Transaction ID : C0616E37-282D-47F0-
 Amount of Each Receipt this Period 350.00
 Memo Item

B. Poblete-Lopez, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27764 Berringer Run
 City Westlake State OH Zip Code 44145-3037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cleveland Clinic Foundation Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 05 / 2018
Transaction ID : 46259F3525E2984C6369
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Raskin, Curtis, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 Oakshire Pl
 City Alamo State CA Zip Code 94507-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2018
Transaction ID : EA7BE820E05AFFD0EE7
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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

A. Resnik, Barry, I., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20000 NE 23rd Ave

| | | |
|---------------|-------------|------------------------|
| City Miami | State FL | Zip Code 33180-1809 |
|---------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) Resnik Skin Institute | Occupation (for Individual) Physician |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.65

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 18 | | 2018 |

Transaction ID : 465BB77BBA2133BDC924

Amount of Each Receipt this Period
83.33

Memo Item

B. Rogers, Heather, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1021 Mercer St

| | | |
|-----------------|-------------|------------------------|
| City Seattle | State WA | Zip Code 98109-4324 |
|-----------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Modern Dermatology | Occupation (for Individual) Physician |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 07 | | 2018 |

Transaction ID : D942B6B8-E9FB-49FB-

Amount of Each Receipt this Period
500.00

Memo Item

C. Rosamilia, Lorraine, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4829 Buffalo Run Rd

| | | |
|----------------------|-------------|------------------------|
| City Port Matilda | State PA | Zip Code 16870-7405 |
|----------------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Geisinger Dermatology - Scenery Park | Occupation (for Individual) Physician |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
449.99

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 15 | | 2018 |

Transaction ID : 47EF8DF80CDFDDF20EEC

Amount of Each Receipt this Period
83.33

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 666.66 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 18 OF 36 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. Rudolph, Theodor, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1850 43rd Ave
 Ste C4
 City Vero Beach State FL Zip Code 32960-0501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sunnycoast Dermatology Inc Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2018
Transaction ID : 22A55A85-CA2C-420F-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Sawyer, Sarah, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Office Park Dr
 Ste 350
 City Mountain Brk State AL Zip Code 35223-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology & Laser of Alabama Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2018
Transaction ID : 2EB6E7B0-6F61-49DA-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Schmidt, Jimmy, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 819 Peakwood Dr
 City Houston State TX Zip Code 77090-2905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2018
Transaction ID : D7546E26F016F18965F
 Amount of Each Receipt this Period 500.00
 Memo Item

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

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 19 OF 36 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. Schuckit, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13800 W North Ave
 Ste 100
 City Brookfield State WI Zip Code 53005-4977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Affiliated Dermatologists Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2018
Transaction ID : 84ACC3A4-5002-40E9-
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Shah, Neil, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 694 Lincoln Ave
 City Saint Paul State MN Zip Code 55105-3533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Clarus Dermatology, PA Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt 09 / 16 / 2018
Transaction ID : 4CABA58EB7F75E6662CB
 Amount of Each Receipt this Period 416.66
 Memo Item

C. Smith, Molly, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1309 Baecher Ln
 City Norfolk State VA Zip Code 23509-1230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pariser Dermatology Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : AC14D6EA-5F9C-43D4-
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1916.66 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Snitzer, Lauren, Allyson, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4410 Westheimer Rd
 Apt 4416
 City Houston State TX Zip Code 77027-1812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US Dermatology Partners Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 433.36

Date of Receipt 09 / 11 / 2018
Transaction ID : 4388AF14A1FBFE6CF88A
 Amount of Each Receipt this Period 41.67
 Memo Item

B. Sobanko, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 Washington Ave
 Villa 6
 City Philadelphia State PA Zip Code 19147-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hospital of The Univ of Pennsylvania Occupation (for Individual) Dermatologic Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 09 / 21 / 2018
Transaction ID : 4952939C38F0660AA245
 Amount of Each Receipt this Period 83.33
 Memo Item

C. Stierman, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24071 W River Rd
 City Perrysburg State OH Zip Code 43551-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dermatology Associates, Inc. Occupation (for Individual) Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2018
Transaction ID : 61254AA6-CAD5-48B6-
 Amount of Each Receipt this Period 500.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 625.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 36 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Torres, Abel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11370 Anderson St
Dept of Dermatology, Ste 2600

| | | |
|--------------------|-------------|------------------------|
| City Loma Linda | State CA | Zip Code 92354-3450 |
|--------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) Loma Linda University | Occupation (for Individual) Dermatologist |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 22 / 2018
Transaction ID : 2FAADE54-11E1-4043-

Amount of Each Receipt this Period
5000.00

Memo Item

B. Weinstein, Andrew, Hart, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3285 Equestrian Dr

| | | |
|--------------------|-------------|------------------------|
| City Boca Raton | State FL | Zip Code 33434-3361 |
|--------------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Boynton Beach Skin | Occupation (for Individual) Dermatologist |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
666.64

Date of Receipt
09 / 13 / 2018
Transaction ID : 4F9DB1726501211DEF86

Amount of Each Receipt this Period
83.33

Memo Item

C. Werth, Victoria, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Department of Dermatology
PCAM Suite 1-330S

| | | |
|----------------------|-------------|------------------------|
| City Philadelphia | State PA | Zip Code 19104-4211 |
|----------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) U of Pennsylvania | Occupation (for Individual) Physician |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 28 / 2018
Transaction ID : B7B0EAB2-B237-4102-

Amount of Each Receipt this Period
500.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5583.33 |
| TOTAL This Period (last page this line number only)..... | |

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

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

FOR LINE NUMBER: PAGE 22 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Zack, Lisa, D., ,

Mailing Address 586 Yucca Rd

City Naples State FL Zip Code 34102-5107

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

Name of Employer (for Individual) Florida Coastal Dermatology Occupation (for Individual) Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 21 / 2018
Transaction ID : CF2CB089294BF8EDE05

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 500.00 |
| TOTAL This Period (last page this line number only).....▶ | 22062.06 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement Amex Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2018

FEC Identification Number

C
Transaction ID : VA39B02F2F.
Amount of Each Disbursement this Period
124.81

Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement VS/MC Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C
Transaction ID : VF064240AEE
Amount of Each Disbursement this Period
420.90

Memo Item

Full Name (Last, First, Middle Initial)

C. MobileCause

Mailing Address 27001 Agoura Road

City Calabasas State CA Zip Code 91301

Purpose of Disbursement MobileCause Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2018

FEC Identification Number

C
Transaction ID : V1CD58EDE!
Amount of Each Disbursement this Period
260.03

Memo Item

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

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

805.74
805.74

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Alamo PAC

Mailing Address 919 Congress Ave
Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement
2018 Contribution

Category/
Type

Candidate Name
Alamo PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 4ADC052A1C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Blumenauer For Congress

Mailing Address 901 SE Oak Street
Suite 105

City Portland State OR Zip Code 97214

Purpose of Disbursement
2018 General

Category/
Type

Candidate Name
Blumenauer, Earl, Francis, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: OR District: 03

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D4F4010178B
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Brady For Congress

Mailing Address PO Box 8277

City The Woodlands State TX Zip Code 77387-8277

Purpose of Disbursement
2018 General

Category/
Type

Candidate Name
Brady, Kevin, Patrick, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: TX District: 08

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 96D3AA52C4
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Cole For Congress

Mailing Address P.O. Box 722256

City
Norman

State
OK

Zip Code
73070

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Cole, Thomas, Jeffery, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OK District: 04

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00379735

Transaction ID : 6AAA80FA4E

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Don Bacon For Congress

Mailing Address P.O. Box 391368

City
Omaha

State
NE

Zip Code
68139

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Bacon, Donald, John, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NE District: 02

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2018

FEC Identification Number

C C00575167

Transaction ID : 7FA6B9DE24

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Dr. Raul Ruiz For Congress

Mailing Address PO Box 3433

City
Palm Desert

State
CA

Zip Code
92261

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Ruiz, Raul, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00502575

Transaction ID : A0062E2D1B

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Drew Ferguson For Congress Inc.

Mailing Address PO Box 71067

City
Newnan

State
GA

Zip Code
30271-1067

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Ferguson, A. Drew, , IV

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: GA District: 03

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00607838

Transaction ID : 73450FA41B:
Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Erik Paulsen

Mailing Address P.O. Box 44369
250 Prairie Center Drive

City
Eden Prairie

State
MN

Zip Code
55344

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Paulsen, Erik, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MN District: 03

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00439661

Transaction ID : 1C2E4F17C1:
Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of John Thune

Mailing Address PO Box 841

City
Sioux Falls

State
SD

Zip Code
57101

Purpose of Disbursement
2022 Primary

011

Category/
Type

Candidate Name

Thune, John, Randolph, ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: SD District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00409581

Transaction ID : 2700A19495:
Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Raja For Congress

Mailing Address PO Box 681202

City Schaumburg State IL Zip Code 60168

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Krishnamoorthi, S. Raja, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2018

FEC Identification Number

C C00575092

Transaction ID : D0771EBF99I

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Great Lakes PAC

Mailing Address 700 13Th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Great Lakes PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00375584

Transaction ID : BA7EB89EE5

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Handel For Congress, Inc.

Mailing Address 4010 Old Milton Pkwy

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Handel, Karen, C., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2018

FEC Identification Number

C C00633362

Transaction ID : 46D8218DFC

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Hoyer For Congress

Mailing Address 700 13Th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Hoyer, Steny, Hamilton, ,

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

State: MD District: 05

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C00140715

Transaction ID : 193DAE6F7D

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hudson For Congress

Mailing Address PO Box 5053

City Concord State NC Zip Code 28027

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Hudson, Richard, Lane, , Jr.

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

State: NC District: 08

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C00504522

Transaction ID : 29D233B4E6C

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Jaime For Congress

Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642-0020

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Herrera Beutler, Jaime, Lynn, ,

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

State: WA District: 03

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2018

FEC Identification Number

C00472704

Transaction ID : 41BA074268I

Amount of Each Disbursement this Period

1000.00

Memo Item

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Johnson For Congress

Mailing Address PO Box 906

City
Marietta

State
OH

Zip Code
45750

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Johnson, William, L., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00476820

Transaction ID : E97F6415F0F

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Judy Chu For Congress

Mailing Address 16633 Ventura Blvd # 1008

City
Encino

State
CA

Zip Code
91436

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Chu, Judy, May, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 27

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00458125

Transaction ID : 408D0CB728f

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Julia Brownley For Congress

Mailing Address PO Box 2018

City
Thousand Oaks

State
CA

Zip Code
91358

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Brownley, Julia, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 26

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00513077

Transaction ID : 1DADAE9BD

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Kevin McCarthy For Congress

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
McCarthy, Kevin, Owen, ,

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

State: CA District: 23

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00420935

Transaction ID : 0FE4EF20A4!

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LaHood for Congress

Mailing Address P.O. Box 10735

City Peoria State IL Zip Code 61612

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
LaHood, Darin, M., ,

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

State: IL District: 18

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2018

FEC Identification Number

C C00575050

Transaction ID : EC13DD3A2A

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lance For Congress

Mailing Address PO Box 999

City Edison State NJ Zip Code 08818-0999

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Lance, Leonard, , ,

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

State: NJ District: 07

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00444224

Transaction ID : D7BB047C9F

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Majority Committee PAC--Mc PAC

Mailing Address PO Box 10134

City
Bakersfield

State
CA

Zip Code
93389-0134

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Majority Committee PAC--Mc PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00428052

Transaction ID : 44037B9BC7I

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. McHenry For Congress

Mailing Address PO Box 2165

City
Gastonia

State
NC

Zip Code
28053-2165

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

McHenry, Patrick, Timothy, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NC District: 10

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00393629

Transaction ID : ACB72770EF

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. McNerney For Congress

Mailing Address P.O. Box 690371

City
Stockton

State
CA

Zip Code
95269

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

McNerney, Gerald, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 09

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00398644

Transaction ID : 45A11AA109

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Mike Kelly For Congress

Mailing Address PO Box 476

City
Lyndora

State
PA

Zip Code
16045

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Kelly, G. Mike, J., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00474189

Transaction ID : F7AA134913I

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Montanans For Tester

Mailing Address PO Box 1135

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Tester, Jon, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MT District:

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2018

FEC Identification Number

C C00412304

Transaction ID : 8A964140005I

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. People For Ben

Mailing Address PO Box 31129

City
Santa Fe

State
NM

Zip Code
87594

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Lujan, Ben, Ray, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00443689

Transaction ID : 8AF1D91B11

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Reinventing A New Direction Political Action Committee

Mailing Address PO Box 72598

City
Newport

State
KY

Zip Code
41072

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Reinventing A New Direction Political Action Committee

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00493924

Transaction ID : 44A2F1CC59.

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Roskam For Congress Committee

Mailing Address P. O. Box 713

City
Wheaton

State
IL

Zip Code
60187

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Roskam, Peter, James, ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: IL

District: 06

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00410969

Transaction ID : 6AF991489EE

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sean Patrick Maloney For Congress

Mailing Address PO Box 270

City
Newburgh

State
NY

Zip Code
12550

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Maloney, Sean, Patrick, ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NY

District: 18

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2018

FEC Identification Number

C C00512426

Transaction ID : 321E82040CI

Amount of Each Disbursement this Period

1000.00

Memo Item

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Shore PAC

Mailing Address P.O. Box 3157

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
2018 Contribution

Category/
Type

Candidate Name
Shore PAC

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 9642CD67B1
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Terri Sewell For Congress

Mailing Address PO Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
2018 General

Category/
Type

Candidate Name
Sewell, Terri, Andrea, ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify)

State: AL District: 07

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 6693B94EA0
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Tom Reed For Congress

Mailing Address PO Box 10847

City Rochester State NY Zip Code 14610-0847

Purpose of Disbursement
2018 General

Category/
Type

Candidate Name
Reed, Thomas, W., , II.

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) Contribution

State: NY District: 23

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 8C837A3F0B
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Tom Rice For Congress

Mailing Address PO Box 70098

City
Myrtle Beach

State
SC

Zip Code
29572-0020

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Rice, Tom, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: SC District: 07

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2018

FEC Identification Number

C C00506048

Transaction ID : FE7DC93771

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Volunteers For Shimkus

Mailing Address PO Box 661

City
Collinsville

State
IL

Zip Code
62234-0661

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Shimkus, John, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: IL District: 15

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2018

FEC Identification Number

C C00258855

Transaction ID : 27DBF3FFAE

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Walorski For Congress Inc

Mailing Address PO Box 954

City
Mishawaka

State
IN

Zip Code
46546-0954

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Walorski, Jacqueline, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IN District: 02

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C C00468579

Transaction ID : 7C0AABA6D

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Welch For Congress

Mailing Address PO Box 1682

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Welch, Peter, Francis, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VT District: 01

Date of Disbursement

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| 09 | | 21 | | 2018 |

FEC Identification Number

C C00413179

Transaction ID : 53ADB666D4

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

1000.00

64500.00