

**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 Osteopathic Information Association - Osteopathic Political Action Committee

ADDRESS (number and street)

511 2nd Street NE

Check if different
than previously
reported. (ACC)

Washington

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00113803

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☒ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
08 01 2026

through

M M M / D D D / Y Y Y Y Y Y
08 31 2026

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

Type or Print Name of Treasurer

Shahid-Salles, Sonbol, , , DO

Signature of Treasurer

Shahid-Salles, Sonbol, , , DO

Date

M M M / D D D / Y Y Y Y Y Y
09 16 2026

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

American Osteopathic Information Association - Osteopathic Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 01 / 2026 To: M M / D D / Y Y Y Y Y Y
08 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2026		152663.36
(b) Cash on Hand at Beginning of Reporting Period.....	204939.60	
(c) Total Receipts (from Line 19)	7047.21	326712.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	211986.81	479376.20
7. Total Disbursements (from Line 31)	16945.16	284334.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	195041.65	195041.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

American Osteopathic Information Association - Osteopathic Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y
08 01 2026

To:

M M / D D / Y Y Y Y
08 31 2026

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).....

6351.21

261708.81

(ii) Unitemized

696.00

62504.03

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

7047.21

324212.84

(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)

7047.21

324212.84

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

2500.00

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))

7047.21

326712.84

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

7047.21

326712.84

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	4945.16	11834.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4945.16	11834.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	271500.00
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	1000.00
(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	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	16945.16	284334.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16945.16	284334.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	7047.21	324212.84
34. Total Contribution Refunds (from Line 28(d))	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7047.21	323212.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	4945.16	11834.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	4945.16	11834.55

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

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

FOR LINE NUMBER: PAGE 6 OF 19
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Bidey, Peter, Frederick, , DOMSEd FAC

Mailing Address 324 Maple Ave

City
Haddonfield

State
NJ

Zip Code
08033-1436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Philadelphia College of Osteopathic Me

Occupation (for Individual)
Dean and Chief Academic Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 06 / 2026

Transaction ID : 52469176

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Howerton, Brianne, , , DOMSBE

Mailing Address 605 Woodglen Cir Apt 205

City
Auburn Hills

State
MI

Zip Code
48326-4524

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 ▼

362.00

Date of Receipt

08 / 07 / 2026

Transaction ID : 52473044

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Jones, Austin, L., , DO

Mailing Address 609 Shadow Hill Dr

City
Clinton

State
MO

Zip Code
64735-9100

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 07 / 2026

Transaction ID : 52473045

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 19
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Toroyan, Raffi, , DO

Mailing Address 10258 Fresh Meadow Ln

City
Boca RatonState
FLZip Code
33498-4602FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 09 / 2026

Transaction ID : 52473051

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Monka, Ira, P., , DO, MHA FA

Mailing Address 10 Glattly Dr

City
DenvilleState
NJZip Code
07834-3837FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2026

Transaction ID : 52475513

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. Hurst, Emily, K., , DOFACOI

Mailing Address 1906 Carsons Cv

City
Commerce TownshipState
MIZip Code
48390-1869FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2688.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2026

Transaction ID : 52501137

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 19
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Moore, Samuel, A., , DO

Mailing Address 19 Beau Vue Ct

City
Little RockState
ARZip Code
72223-5167FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 28 / 2026**Transaction ID : 52502268**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Allee, Brian, A., LTC, DO

Mailing Address 105 N Indian Meridian Rd

City
Pauls ValleyState
OKZip Code
73075-9236FEC 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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 26 / 2026**Transaction ID : 52529380**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Al-Sayyed, Ammar, , , OMS III

Mailing Address 6408 Garden Rose Path

City
AustinState
TXZip Code
78754-2155FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 26 / 2026**Transaction ID : 52529381**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 19
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Cyrus, Scott, S., , DOFACOP

Mailing Address 11204 S Winston Ave

City
TulsaState
OKZip Code
74137-7526FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United Federation of Osteopathic SocieOccupation (for Individual)
Secretary/Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 26 / 2026

Transaction ID : 52529382

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Dolansky, Robert, S., , DOMBA

Mailing Address 2402 MacArthur Rd

City
WhitehallState
PAZip Code
18052-3810FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
St Luke's Family Health CenterOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 27 / 2026

Transaction ID : 52529383

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Evans, Edmond, C., , Jr, DO

Mailing Address 300 Holdeman Ln

City
Mineral WellsState
TXZip Code
76067-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 27 / 2026

Transaction ID : 52529384

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

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

FOR LINE NUMBER: PAGE 10 OF 19
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Hoegerl, Carl, , , DOMSc, MB

Mailing Address 306 Liberty View Ln

City
Lynchburg

State
VA

Zip Code
24502-2291

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Liberty University College of Osteopat

Occupation (for Individual)
Professor of Neurology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 19 / 2026

Transaction ID : 52529385

Amount of Each Receipt this Period

120.00

☐ Memo Item

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

B. Hughes, Chris, , ,

Mailing Address 511 2nd St NE

City
Washington

State
DC

Zip Code
20002-4916

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Osteopathic Association

Occupation (for Individual)
AOA - OPAC/Grassroots Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 26 / 2026

Transaction ID : 52529386

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Hunt, Adam, C., , DOMHS, FA

Mailing Address 3683 Deibel Dr

City
Saginaw

State
MI

Zip Code
48603-7274

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 ▼

1823.00

Date of Receipt

08 / 21 / 2026

Transaction ID : 52529387

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

670.00

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 OF 19
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Jackson, Jason, R., , DO

Mailing Address 1323 N Grant Ave

City
Columbus

State
OH

Zip Code
43201-2512

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 ▼

1050.00

Date of Receipt

08 / 23 / 2026

Transaction ID : 52529388

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Jackson, Jason, R., , DO

Mailing Address 1323 N Grant Ave

City
Columbus

State
OH

Zip Code
43201-2512

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 ▼

1300.00

Date of Receipt

08 / 26 / 2026

Transaction ID : 52529389

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Kalata, John, J., , DO

Mailing Address 4138 Aveniel Ct

City
Erie

State
PA

Zip Code
16506-4640

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

08 / 23 / 2026

Transaction ID : 52529391

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

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

FOR LINE NUMBER: PAGE 12 OF 19
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Kaprow, Marc, G., , DOMHA, MAC

Mailing Address PO Box 623222

City
Oviedo

State
FL

Zip Code
32762-3222

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 ▼

517.35

Date of Receipt

08 / 17 / 2026

Transaction ID : 52529392

Amount of Each Receipt this Period

134.00

☐ Memo Item

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

B. Kauffman, Mark, K., , DO, MSMED,

Mailing Address 14216 11th Ter NE

City
Bradenton

State
FL

Zip Code
34212-7412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lake Erie College of Osteopathic Medic

Occupation (for Individual)
Dean of Academic Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 26 / 2026

Transaction ID : 52529393

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Lally, James, M., , DOMMM, FAC

Mailing Address 592 N Euclid Ave

City
Upland

State
CA

Zip Code
91786-4734

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Health Service Alliance

Occupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

08 / 18 / 2026

Transaction ID : 52529394

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1384.00

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

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

FOR LINE NUMBER: PAGE 13 OF 19
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Nickles, Steven, L., , DO

Mailing Address 470 N Franklin Tpke Ste 203

City
Ramsey

State
NJ

Zip Code
07446-1385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Valley Diagnostic Medical Center

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 26 / 2026

Transaction ID : 52529395

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Shanafelt, Christie, A., , DO

Mailing Address 2000 Baltimore Dr

City
Richardson

State
TX

Zip Code
75081-5406

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 ▼

208.38

Date of Receipt

08 / 17 / 2026

Transaction ID : 52529397

Amount of Each Receipt this Period

41.66

☐ Memo Item

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

C. Tang, Alex, , , OMS III

Mailing Address 10266 Victoria St

City
Rancho Cucamonga

State
CA

Zip Code
91701-5257

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 26 / 2026

Transaction ID : 52529398

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

541.66

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

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

FOR LINE NUMBER: PAGE 14 OF 19
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

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

A. Waters, Lynn, M., Jr., DOFAC

Mailing Address 1967 Misty Woods Dr

City
Duluth

State
GA

Zip Code
30097-7961

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 ▼

477.80

Date of Receipt

08 / 17 / 2026

Transaction ID : 52529399

Amount of Each Receipt this Period

55.55

☐ Memo Item

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

B. Zimmerman, Thomas, G., , DOMBA, FA

Mailing Address 220 N Delaware Ave

City
North Massapequa

State
NY

Zip Code
11758-1826

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

New York Institute of Technology

Occupation (for Individual)

Associate Professor of Family Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 26 / 2026

Transaction ID : 52529400

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C.

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)..... ►

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

305.55

6351.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. PayPal, Inc.

Mailing Address 2211 N 1st St

City
San JoseState
CAZip Code
95131-2021

Purpose of Disbursement

Credit card processing fees

Candidate Name

001

Category/
Type

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
0	8			3	1			2	0	2	6		

FEC Identification Number

C

Transaction ID : 52471844

Amount of Each Disbursement this Period

46.90

☐ Memo Item Credit card processing fees

Full Name (Last, First, Middle Initial)

B. PayPal, Inc.

Mailing Address 2211 N 1st St

City
San JoseState
CAZip Code
95131-2021

Purpose of Disbursement

Credit card processing fees

Candidate Name

001

Category/
Type

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
0	8			0	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : 52526894

Amount of Each Disbursement this Period

30.00

☐ Memo Item Credit card processing fees

Full Name (Last, First, Middle Initial)

C. MobileCause, Inc.

Mailing Address PO Box 122145

City
DallasState
TXZip Code
75312-2145

Purpose of Disbursement

Credit card processing fees

Candidate Name

001

Category/
Type

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
0	8			0	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : 52526895

Amount of Each Disbursement this Period

4868.26

☐ Memo Item Credit card processing fees**SUBTOTAL** of Disbursements This Page (optional)..... ►

4945.16

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

4945.16

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. Onder for Congress

Mailing Address 2025 Zumbuhl Rd, #35

City
Saint CharlesState
MOZip Code
63303

Purpose of Disbursement

Contribution

011

Candidate Name

Onder, Robert, F., Rep., Jr.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: MO

District: 03

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4		2	0	2	6		

FEC Identification Number

C C00870238

Transaction ID : 52468742

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. New Democrat Coalition Action Fund

Mailing Address 600 Pennsylvania Ave SE, #410

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5		2	0	2	6		

FEC Identification Number

C C00409730

Transaction ID : 52469140

Amount of Each Disbursement this Period

5000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Analilia Mejia for New JerseyMailing Address 13 Municipal Plaza
PO Box 41City
BloomfieldState
NJZip Code
07003

Purpose of Disbursement

Contribution

011

Candidate Name

Mejia, Analilia, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ

District: 11

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7		2	0	2	6		

FEC Identification Number

C C00927681

Transaction ID : 52484226

Amount of Each Disbursement this Period

1500.00

☐ Memo Item Contribution

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

9000.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. Aaron Bean for Congress

Mailing Address 2640A Mitcham Drive

City
TallahasseeState
FLZip Code
32308

Purpose of Disbursement

Contribution

011

Candidate Name

Bean, Aaron, P., Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C C00816983

Transaction ID : 52484227

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Aaron Bean for Congress

Mailing Address 2640A Mitcham Drive

City
TallahasseeState
FLZip Code
32308

Purpose of Disbursement

Contribution

011

Candidate Name

Bean, Aaron, P., Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C C00816983

Transaction ID : 52484228

Amount of Each Disbursement this Period

500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C. Moolenaar for Congress

Mailing Address 913 S. Saginaw Road, Suite 209

City
MidlandState
MIZip Code
48640-6824

Purpose of Disbursement

Void - Check dated 01.27.2026

011

Candidate Name

Moolenaar, John, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 02

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C C00561530

Transaction ID : 52484334

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item Void - Check dated 01.27.2026

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. Collins Victory Committee

Mailing Address 901 N Washington St, Ste 700

City
AlexandriaState
VAZip Code
22314

Purpose of Disbursement

Void - Check dated 02.04.2026

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C C00692897

Transaction ID : 52484335

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item Void - Check dated 02.04.2026

Full Name (Last, First, Middle Initial)

B. Bill Cassidy for US Senate

Mailing Address PO Box 80505

City
Baton RougeState
LAZip Code
70898-0505

Purpose of Disbursement

Void - Check dated 05.14.2026

Candidate Name

Cassidy, William, M., Sen.,

Office Sought:

☐	House
☒	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify)		

State: LA

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	6	

FEC Identification Number

C C00543983

Transaction ID : 52484336

Amount of Each Disbursement this Period

- 1000.00

☐ Memo Item Void - Check dated 05.14.2026

Full Name (Last, First, Middle Initial)

C. Jake Auchincloss for Congress

Mailing Address PO Box 600698

City
NewtonvilleState
MAZip Code
02460

Purpose of Disbursement

Contribution

Candidate Name

Auchincloss, Jake, , Rep.,

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: MA

District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	8			2	0	2	6	

FEC Identification Number

C C00721449

Transaction ID : 52484416

Amount of Each Disbursement this Period

1500.00

☐ Memo Item Contribution**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-	5	0	0	.	0	0
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. Maxine for Congress

Mailing Address PO Box 12209

City
PortlandState
ORZip Code
97212

Purpose of Disbursement

Contribution

011

Candidate Name

Dexter, Maxine, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: OR

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	8			2	0	2	6		

FEC Identification Number

C C00859108

Transaction ID : 52484417

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

B. Jeffries for Congress

Mailing Address PO Box 65322

City
WashingtonState
DCZip Code
20035

Purpose of Disbursement

Contribution

011

Candidate Name

Jeffries, Hakeem, , Rep.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	8			2	0	2	6		

FEC Identification Number

C C00503052

Transaction ID : 52484510

Amount of Each Disbursement this Period

2500.00

☐ Memo Item Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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)..... ►

3500.00

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

12000.00