

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
The Doctors' Company Federal PAC (DOCPAC)

ADDRESS (number and street) 185 Greenwood Road  
 Check if different than previously reported. (ACC)  
Napa CA 94558

2. **FEC IDENTIFICATION NUMBER** C00300376  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2006 through 09 30 2006

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 Leona Egeland Siadek

Signature of Treasurer Electronically Filed by Leona Egeland Siadek Date 10 11 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
The Doctors' Company Federal PAC (DOCPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		43217.07
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	26777.49									
(c) Total Receipts (from Line 19) .....	26431.64	78051.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	53209.13	121268.76								
7. Total Disbursements (from Line 31) .....	74000.00	142059.63								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	-20790.87	-20790.87								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

The Doctors' Company Federal PAC (DOCPAC)

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	725.00	3822.01
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	25706.64	74229.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26431.64	78051.69
(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) .....	26431.64	78051.69
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	0.00
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 Transfer (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)) .....	26431.64	78051.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26431.64	78051.69

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74000.00	141256.89
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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.....	0.00	802.74
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	74000.00	142059.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	74000.00	142059.63

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	26431.64	78051.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26431.64	78051.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Dr. Shawn Dhillon, MD		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 21 Brett Manor Ct		Transaction ID: SA11A1.10377
City State Zip Code Cockeysville MD 21030	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		Political Contribution
Name of Employer Shawn Dhillon MD	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Keith Jackson, MD		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006
Mailing Address 5405 Senford Ave		Transaction ID: SA11A1.10526
City State Zip Code Los Angeles CA 90056	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		Political Contribution
Name of Employer Keith W Jackson MD	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Gamini Jayasinghe, MD		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2006
Mailing Address 8522 Travistruck Place		Transaction ID: SA11A1.10532
City State Zip Code Buena Park CA 90621	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		Political Contribution
Name of Employer Gamini S Jayasinghe MD	Occupation Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	575.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 20	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
The Doctors' Company Federal PAC (DOCPAC)

**A.** Full Name (Last, First, Middle Initial)  
MD James Schwanke

Mailing Address 3700 24th St

City State Zip Code  
San Francisco CA 94114

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

Name of Employer Occupation  
Noe Valley Pediatrics Entity

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼

262.50

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 21 / 2006

Transaction ID: SA11A1.10812

Amount of Each Receipt this Period  
150.00

Political Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	725.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. ANNA ESHOO FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11038 Date of Disbursement
Mailing Address 555 Capitol Mall Suite 1425 c/o Bruce Ives		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name ANNA ESHOO FOR CONGRESS		<input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: CA	District: 14	

Full Name (Last, First, Middle Initial) <b>B. BILIRAKIS FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11020 Date of Disbursement
Mailing Address 610 S. Boulevard c/o Nancy H. Watkins		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name BILIRAKIS FOR CONGRESS		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: FL	District: 09	

Full Name (Last, First, Middle Initial) <b>C. BOB CORKER FOR SENATE</b>		<b>Transaction ID:</b> SB23.11042 Date of Disbursement
Mailing Address 832 GEORGIA AVENUE STE 200 c/o Kim Kaegi - Treasurer		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2006"/>
City CHATTANOOGA	State TN	Zip Code 37402
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name BOB CORKER FOR SENATE		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: TN	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. BRIAN BAIRD FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11050 Date of Disbursement
Mailing Address PO Box 5016 c/o Chris Crowley		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Vancouver	State WA	Zip Code 98668
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name BRIAN BAIRD FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA District: 03		
		Amount of Each Disbursement this Period <input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) <b>B. CHAFEE FOR SENATE</b>		<b>Transaction ID:</b> SB23.11000 Date of Disbursement
Mailing Address PO BOX 7329 c/o Paul Maloney		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City WARWICK	State RI	Zip Code 02887
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name CHAFEE FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: RI District: 00		
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

Full Name (Last, First, Middle Initial) <b>C. CONGRESSMAN BART GORDON COMMITTEE</b>		<b>Transaction ID:</b> SB23.11054 Date of Disbursement
Mailing Address P.O. Box 2008 c/o Richard F. LaRoche Jr.		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Murfreesboro	State TN	Zip Code 37133
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name CONGRESSMAN BART GORDON COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 06		
		Amount of Each Disbursement this Period <input type="text" value="500.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

PAGE 10 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. DIANA DEGETTE FOR CONGRESS INC.</b>		<b>Transaction ID:</b> SB23.11058 Date of Disbursement
Mailing Address P.O. Box 61337 c/o Edgar Neel		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Denver	State CO	Zip Code 80206
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name DIANA DEGETTE FOR CONGRESS INC.		<input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: CO	District: 01	

Full Name (Last, First, Middle Initial) <b>B. DUTCH RUPPERSBERGER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11056 Date of Disbursement
Mailing Address 22 West Padonia Road Suite C-141 c/o David C. Deger		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Timonium	State MD	Zip Code 21093
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name DUTCH RUPPERSBERGER FOR CONGRESS		<input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: MD	District: 02	

Full Name (Last, First, Middle Initial) <b>C. FITZPATRICK FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.10990 Date of Disbursement
Mailing Address 115 N Broad Street c/o John Poprik		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City Doylestown	State PA	Zip Code 18901
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name FITZPATRICK FOR CONGRESS		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: PA	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. FRIENDS FOR MIKE MCGAVICK</b>		Transaction ID: SB23.10980 Date of Disbursement																					
Mailing Address 921 - 11th Street, Suite 420		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	6		2	0	0	6														
City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period																				
Purpose of Disbursement Political Contribution		011 Category/ Type	5000.00																				
Candidate Name FRIENDS FOR MIKE MCGAVICK																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: WA	District: 00																						

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DAVE WELDON</b>		Transaction ID: SB23.11040 Date of Disbursement																					
Mailing Address PO Box 968 c/o Thomas Flavin		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	9		2	0	0	6														
City Melbourne	State FL	Zip Code 32902	Amount of Each Disbursement this Period																				
Purpose of Disbursement Political Contribution		011 Category/ Type	1000.00																				
Candidate Name FRIENDS OF DAVE WELDON																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: FL	District: 15																						

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DENNIS CARDOZA</b>		Transaction ID: SB23.10982 Date of Disbursement																					
Mailing Address 555 Capitol Mall Suite 1425		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	5		2	0	0	6														
City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period																				
Purpose of Disbursement Political Contribution		011 Category/ Type	1000.00																				
Candidate Name FRIENDS OF DENNIS CARDOZA																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: CA	District: 18																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF GEORGE ALLEN</b>		<b>Transaction ID: SB23.11043</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address c/o Richard L. Sharp PO BOX 6859		Amount of Each Disbursement this Period 5000.00
City ARLINGTON State VA Zip Code 22206		
Purpose of Disbursement Political Contribution Candidate Name FRIENDS OF GEORGE ALLEN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 00	011 Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JOE PITTS</b>		<b>Transaction ID: SB23.10998</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 6
Mailing Address PO BOX 775 c/o Duer Pierce		Amount of Each Disbursement this Period 1000.00
City Unionville State PA Zip Code 19375		
Purpose of Disbursement Political Contribution Candidate Name FRIENDS OF JOE PITTS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 16	011 Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JOHN BOEHNER</b>		<b>Transaction ID: SB23.11044</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address c/o Mrs. Mary Dotter-Clancy/Treasu 7908-I Cincinnati Dayton Road		Amount of Each Disbursement this Period 5000.00
City West Chester State OH Zip Code 45069		
Purpose of Disbursement Political Contribution Candidate Name FRIENDS OF JOHN BOEHNER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 08	011 Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. GENE GREEN CONGRESSIONAL CAMPAIGN</b>		<b>Transaction ID:</b> SB23.11052 Date of Disbursement
Mailing Address PO BOX 16128 c/o Helen Green		<input type="text" value="09"/> <input type="text" value="27"/> / <input type="text" value="2006"/>
City HOUSTON	State TX	Zip Code 77222
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name GENE GREEN CONGRESSIONAL CAMPAIGN		Amount of Each Disbursement this Period <input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 29	

Full Name (Last, First, Middle Initial) <b>B. HEATHER WILSON FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11011 Date of Disbursement
Mailing Address P.O. BOX 14070 c/o David A. Archuleta		<input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="2006"/>
City ALBUQUERQUE	State NM	Zip Code 87191
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name HEATHER WILSON FOR CONGRESS		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM	District: 01	

Full Name (Last, First, Middle Initial) <b>C. JIM GERLACH FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.11008 Date of Disbursement
Mailing Address PO Box 87 c/o Michael DeHaven		<input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="2006"/>
City Uwchland	State PA	Zip Code 19480
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name JIM GERLACH FOR CONGRESS COMMITTEE		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. JOE WILSON FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.11014 Date of Disbursement
Mailing Address Post Office Box 2145 c/o Donald H. Burkett		<input type="text" value="08"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City West Columbia	State SC	Zip Code 29171
Purpose of Disbursement Political Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOE WILSON FOR CONGRESS COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 02	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. MARIO DIAZ-BALART FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.10976 Date of Disbursement
Mailing Address 2801 Ponce de Leon Blvd. Ste1000 c/o Jose A. Riesco		<input type="text" value="09"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Coral Gables	State FL	Zip Code 33134
Purpose of Disbursement Political Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MARIO DIAZ-BALART FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 25	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. MARK KENNEDY 06</b>		<b>Transaction ID:</b> SB23.11046 Date of Disbursement
Mailing Address c/o James D. Loizeaux/Treasurer PO BOX 49333		<input type="text" value="09"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City BLAINE	State MN	Zip Code 55449
Purpose of Disbursement Political Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MARK KENNEDY 06		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 00	

Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. MARY BONO COMMITTEE</b>		<b>Transaction ID:</b> SB23.11023 Date of Disbursement
Mailing Address P.O. Box 3370 c/o Meredith G. Kelley		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City Palm Springs	State CA	Zip Code 92263
Purpose of Disbursement Political Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MARY BONO COMMITTEE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 45	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>B. MCCONNELL SENATE COMMITTEE '08</b>		<b>Transaction ID:</b> SB23.11033 Date of Disbursement
Mailing Address PO BOX 1496 c/o Larry J. Steinberg		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City LOUISVILLE	State KY	Zip Code 40201
Purpose of Disbursement Political Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MCCONNELL SENATE COMMITTEE '08		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY	District: 00	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) <b>C. MEEKS FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.10995 Date of Disbursement
Mailing Address 219-10 South Conduit Avenue c/o Joan E. Flowers, Esq.		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>
City Springfield Garden	State NY	Zip Code 11413
Purpose of Disbursement Political Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name MEEKS FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 06	

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. MICHAEL BURGESS FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11048 Date of Disbursement
Mailing Address PO Box 2334 c/o Robert Sherman		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Denton	State TX	Zip Code 76202
Purpose of Disbursement Political Contribution		<input type="text" value="1000.00"/>
Candidate Name MICHAEL BURGESS FOR CONGRESS		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 26	

Full Name (Last, First, Middle Initial) <b>B. NATHAN DEAL FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.10992 Date of Disbursement
Mailing Address PO BOX 902 c/o Philip A. Wilheit		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>
City GAINESVILLE	State GA	Zip Code 30503
Purpose of Disbursement Political Contribution		<input type="text" value="2500.00"/>
Candidate Name NATHAN DEAL FOR CONGRESS		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 09	

Full Name (Last, First, Middle Initial) <b>C. PRICE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.10970 Date of Disbursement
Mailing Address P.O. Box 425 c/o Stephen M. Dorvee		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>
City Roswell	State GA	Zip Code 30077
Purpose of Disbursement Political Contribution		<input type="text" value="1000.00"/>
Candidate Name PRICE FOR CONGRESS		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 06	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. PRYCE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11029 Date of Disbursement
Mailing Address 145 E. Rich Street c/o Robert J. Peck		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name PRYCE FOR CONGRESS		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: OH	District: 15	

Full Name (Last, First, Middle Initial) <b>B. SANTORUM 2006</b>		<b>Transaction ID:</b> SB23.11002 Date of Disbursement
Mailing Address ONE TOWER BRIDGE SUITE 1440 c/o Gregg R. Melinson		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City WEST CONSHOHOCKEN	State PA	Zip Code 19428
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name SANTORUM 2006		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: PA	District: 00	

Full Name (Last, First, Middle Initial) <b>C. SCHWAB FOR US CONGRESS</b>		<b>Transaction ID:</b> SB23.11036 Date of Disbursement
Mailing Address PO BOX 2672		<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City OLATHE	State KS	Zip Code 66063
Purpose of Disbursement Primary 2006 Debt Retirement		Amount of Each Disbursement this Period
Candidate Name SCHWAB FOR US CONGRESS		<input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <input type="text" value="011"/>
State: KS	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. SIMMONS FOR CONGRESS</b>		Transaction ID: SB23.10974 Date of Disbursement
Mailing Address P.O. Box 268 Drawer 271 c/o Anne Simeone		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Stonington	State CT	Zip Code 06378
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name SIMMONS FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT	District: 2	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>B. STEELE FOR MARYLAND INC</b>		Transaction ID: SB23.10984 Date of Disbursement
Mailing Address P.O. Box 347		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Annapolis	State MD	Zip Code 21404
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name STEELE FOR MARYLAND INC		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 03	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>C. SWEENEY FOR CONGRESS INC</b>		Transaction ID: SB23.11017 Date of Disbursement
Mailing Address Post Office Box 1465 c/o Thomas E. Anfinson CPA		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Clifton Park	State NY	Zip Code 12065
Purpose of Disbursement Political Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name SWEENEY FOR CONGRESS INC		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 20	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. TALENT FOR SENATE COMMITTEE</b>		<b>Transaction ID:</b> SB23.10977 Date of Disbursement
Mailing Address 507 Capitol Court, NE, #100		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name TALENT FOR SENATE COMMITTEE		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State: MO	District: 00	

Full Name (Last, First, Middle Initial) <b>B. TEXANS FOR HENRY CUELLAR</b>		<b>Transaction ID:</b> SB23.11026 Date of Disbursement
Mailing Address 1519 Washington Street 2nd Floor, Suite 200		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City Laredo	State TX	Zip Code 78042
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name TEXANS FOR HENRY CUELLAR		<input type="text" value="500.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State: TX	District: 28	

Full Name (Last, First, Middle Initial) <b>C. TOM KEAN FOR US SENATE INC</b>		<b>Transaction ID:</b> SB23.11005 Date of Disbursement
Mailing Address PO BOX 225 c/o Ronald Gravino		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City COLONIA	State NJ	Zip Code 07067
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period
Candidate Name TOM KEAN FOR US SENATE INC		<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State: NJ	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="10500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
The Doctors' Company Federal PAC (DOCPAC)

Full Name (Last, First, Middle Initial) <b>A. VOLUNTEERS FOR SHIMKUS</b>		<b>Transaction ID:</b> SB23.10972
Mailing Address P.O. Box 5458 c/o Jennifer M. Dillman		Date of Disbursement MM / DD / YYYY 09 / 07 / 2006
City Springfield	State IL	Zip Code 62705
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period <b>2000.00</b>
Candidate Name VOLUNTEERS FOR SHIMKUS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 19	Category/Type <b>011</b>

Full Name (Last, First, Middle Initial) <b>B. WHALEN FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.11031
Mailing Address P. O. Box 750 c/o Kirk Evan Whalen		Date of Disbursement MM / DD / YYYY 09 / 14 / 2006
City Bettendorf	State IA	Zip Code 52722
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period <b>1000.00</b>
Candidate Name WHALEN FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	Category/Type <b>011</b>

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

**3000.00**

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

**74000.00**