

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 College of Cardiology Political Action Committee

ADDRESS (number and street) 2400 N St NW
Check if different than previously reported. (ACC) Washington DC 20037-1153

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00375360 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / 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 11 / 06 / 2018 in the State of DC

5. Covering Period 10 / 18 / 2018 through 11 / 26 / 2018

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

Signature of Treasurer Davids, Carlton, G., , [Electronically Filed] Date 12 / 06 / 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**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

American College of Cardiology Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		79748.32
(b) Cash on Hand at Beginning of Reporting Period.....	65993.86	
(c) Total Receipts (from Line 19)	23889.02	396296.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	89882.88	476044.64
7. Total Disbursements (from Line 31).....	61510.85	447672.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	28372.03	28372.03
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:

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 College of Cardiology Political Action Committee

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).....	18355.56	337850.53
(ii) Unitemized	3611.14	47614.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21966.70	385465.49
(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)	21966.70	385465.49
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).....	1922.32	8330.83
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)).....▶	23889.02	396296.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	23889.02	396296.32

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	1010.85	8330.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1010.85	8330.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	60500.00	438500.00
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	841.68
(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	841.68
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)) ..	61510.85	447672.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61510.85	447672.61

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)	21966.70	385465.49
34. Total Contribution Refunds (from Line 28(d))	0.00	841.68
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21966.70	384623.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1010.85	8330.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1922.32	8330.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-911.47	0.10

**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 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Ahmad, Anwar, , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 S Florey Ave

City Mt Pleasant	State TX	Zip Code 75455-5929
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : 4B5324C8684C8D9096C

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 48 Willow Hill Rd

City Saint Louis	State MO	Zip Code 63124-2071
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Saint Louis University	Occupation (for Individual) CLINICAL CARDIOLOGY/GENERAL C
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2018

Transaction ID : 439DB5776FE71148CC85

Amount of Each Receipt this Period
50.00

Memo Item

c. Alexander, Jay, H., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2590 Salceda Dr

City Northbrook	State IL	Zip Code 60062-7013
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) North Shore Cardiologists, SC	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3916.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2018

Transaction ID : 4AAAA3CAAC332279319B

Amount of Each Receipt this Period
416.66

Memo Item

SUBTOTAL of Receipts This Page (optional).....	716.66
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 7 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Anderson, Jeffrey, L., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5121 S Cottonwood St

City Murray	State UT	Zip Code 84107-5701
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Intermountain Medical Center	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : 094B7BB7-7864-4CB3-

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 152 Bridgewater Blvd

City Ridgeland	State MS	Zip Code 39157-8677
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) University of Mississippi Medical Cent	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2018

Transaction ID : 450E9462270DAC065E83

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 152 Bridgewater Blvd

City Ridgeland	State MS	Zip Code 39157-8677
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) University of Mississippi Medical Cent	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : 479495028778F6218816

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 8 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Battey, Louis, L., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1076 Brookhaven Sq NE

City Brookhaven	State GA	Zip Code 30319-2878
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2018

Transaction ID : C27A921DE1E67421961

Amount of Each Receipt this Period
250.00

Memo Item

B. Bell, Willie, W., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1108 Bimini Rd

City Jacksonville	State FL	Zip Code 32216-3218
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) St. Vincent's Medical Center	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2018

Transaction ID : 9DED5494BEE3C4A3DE2

Amount of Each Receipt this Period
250.00

Memo Item

C. Brown, Charles, L., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1800 Howell Mill Rd NW
Ste 850

City Atlanta	State GA	Zip Code 30318-0923
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Piedmont Healthcare	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2041.74

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		11		2018

Transaction ID : 4DD8B45E9903CCCCFDE1B

Amount of Each Receipt this Period
208.34

Memo Item

SUBTOTAL of Receipts This Page (optional).....	708.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Brown, Marcus, L., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1460 Portmarnock Dr

City Alpharetta	State GA	Zip Code 30005-6967
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

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
11	/	16	/	2018

Transaction ID : 59B1CE17-66DA-43A3-

Amount of Each Receipt this Period
250.00

Memo Item

B. Burke, James, F., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 Brydon Rd

City Wynnewood	State PA	Zip Code 19096-3306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : A0E812D36F91F195494

Amount of Each Receipt this Period
250.00

Memo Item

c. Chapel, Harold, L., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4667 W 21st Street Cir

City Greeley	State CO	Zip Code 80634-3265
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : 01DBAF77B3F4EF9E560

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Chastain, Hollace, D., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11108 Parkview Circle Dr

City Fort Wayne	State IN	Zip Code 46845-1730
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Fort Wayne Cardiology	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : 468097BCBFDEAE2D11DA

Amount of Each Receipt this Period
100.00

Memo Item

B. Chazal, Richard, A., , MACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9800 S Healthpark Dr
Ste 320

City Fort Myers	State FL	Zip Code 33908-3630
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lee Health	Occupation (for Individual) ADULT CARDIOLOGY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : 49FDB3C53BD5EC06F2CF

Amount of Each Receipt this Period
83.34

Memo Item

c. Clark, Bernard, A., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 Woodland St

City Hartford	State CT	Zip Code 06105-1208
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) St. Francis Hospital and Medical Cente	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : 4149854D2434A825DAEE

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	233.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Cleveland, Joseph, C., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9176 E Wesley Ave
 City Denver State CO Zip Code 80231-7654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Colorado Occupation (for Individual) CARDIAC SURGERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 10 / 21 / 2018
Transaction ID : 4A2C9B86CD35734240C4
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Collinge, Lianna, S., , CAE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4507 Ray Nash Dr NW
 City Gig Harbor State WA Zip Code 98335-5884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AZ CA CO & WA Chapters of the ACC Occupation (for Individual) Chapter Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2169.00

Date of Receipt 11 / 01 / 2018
Transaction ID : 43399D18EC96041F1E39
 Amount of Each Receipt this Period 208.50
 Memo Item

C. Crossley, George, H., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 276 Stratton Ct
 City Brentwood State TN Zip Code 37027-4228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vanderbilt University Occupation (for Individual) ELECTROPHYSIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 583.32

Date of Receipt 11 / 04 / 2018
Transaction ID : 40F597227EA3107648DA
 Amount of Each Receipt this Period 145.83
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	396.33
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 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Dillahunt, Paul, H., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 108 Troon Point Ln

City Ponte Vedra	State FL	Zip Code 32082-2065
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

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
10		24		2018

Transaction ID : 7194466BBB32B25F208

Amount of Each Receipt this Period
500.00

Memo Item

B. Dillon, William, C., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7611 Wolfpen Ridge Ct

City Prospect	State KY	Zip Code 40059-7110
------------------	-------------	------------------------

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

Name of Employer (for Individual) Louisville Cardiology	Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : A143E4180EC4D3DD75E

Amount of Each Receipt this Period
250.00

Memo Item

C. Erb, Blair, D., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 Stagecoach Dr

City Bozeman	State MT	Zip Code 59715-9287
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Bozeman Deaconess Cardiology Consultan	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3041.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2018

Transaction ID : 44E487B0ACA37600EE5A

Amount of Each Receipt this Period
208.34

Memo Item

SUBTOTAL of Receipts This Page (optional).....	958.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Fasules, James, W., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2718 Stephenson Ln NW

City Washington	State DC	Zip Code 20015-1504
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) PEDIATRIC CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2018

Transaction ID : 5417E8788FF9BA1503A

Amount of Each Receipt this Period
250.00

Memo Item

B. Finkelhor, Robert, S., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 Metrohealth Dr

City Cleveland	State OH	Zip Code 44109-1900
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Metro Health Medical Center	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		13		2018

Transaction ID : 5CE959A7B830C793EFC

Amount of Each Receipt this Period
250.00

Memo Item

C. Foster, Warren, Q., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 Robin Ln SE

City Huntsville	State AL	Zip Code 35802-1001
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Huntsville Cardiovascular Clinic, P.C.	Occupation (for Individual) ELECTROPHYSIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
208.30

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		15		2018

Transaction ID : 46CE88894516D6155817

Amount of Each Receipt this Period
20.83

Memo Item

SUBTOTAL of Receipts This Page (optional).....	520.83
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 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Fry, Edward, T. A., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 E 71st St
 City Indianapolis State IN Zip Code 46220-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St. Vincent Medical Group Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4583.27

Date of Receipt 10 / 23 / 2018
Transaction ID : 43519F56CCAA091807C5
 Amount of Each Receipt this Period 416.66
 Memo Item

B. Fry, Edward, T. A., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 E 71st St
 City Indianapolis State IN Zip Code 46220-1012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St. Vincent Medical Group Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4583.27

Date of Receipt 11 / 23 / 2018
Transaction ID : 4F408D5B95D9FAD9635E
 Amount of Each Receipt this Period 416.66
 Memo Item

C. Gilbert, Olivia, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1513 Boxthorne Ln
 City Winston Salem State NC Zip Code 27106-4471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Novant Health Forsyth Heart and Wellne Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 374.94

Date of Receipt 10 / 23 / 2018
Transaction ID : 46C68E1BC98295261DD8
 Amount of Each Receipt this Period 41.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	874.98
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 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Gilbert, Olivia, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1513 Boxthorne Ln
 City Winston Salem State NC Zip Code 27106-4471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Novant Health Forsyth Heart and Wellne Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 374.94

Date of Receipt 11 / 23 / 2018
Transaction ID : 46B8BA4CEB85CEB20657
 Amount of Each Receipt this Period 41.66
 Memo Item

B. Gladstone, Julian, L., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 Galer Dr
 City Newtown Square State PA Zip Code 19073-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2018
Transaction ID : C82ADFF2B7D172E6576
 Amount of Each Receipt this Period 250.00
 Memo Item

c. Gogo, Prospero, B., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 Colchester Ave McClure1Cardiology
 City Burlington State VT Zip Code 05401-1473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Interventional-Univ. of Vermont/Fletch Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 890.00

Date of Receipt 10 / 23 / 2018
Transaction ID : 4816886B8D5331D28C80
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	376.66
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 16 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Gogo, Prospero, B., , FACC

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

Mailing Address 111 Colchester Ave
McClure1Cardiology

City Burlington State VT Zip Code 05401-1473

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

Name of Employer (for Individual) Interventional-Univ. of Vermont/Fletch Occupation (for Individual) INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt 11 / 09 / 2018

Transaction ID : 492185E240176300463B

Amount of Each Receipt this Period 125.00

Memo Item

B. Gogo, Prospero, B., , FACC

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

Mailing Address 111 Colchester Ave
McClure1Cardiology

City Burlington State VT Zip Code 05401-1473

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

Name of Employer (for Individual) Interventional-Univ. of Vermont/Fletch Occupation (for Individual) INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt 11 / 23 / 2018

Transaction ID : 4DF4B0AD16748690C5BE

Amount of Each Receipt this Period 85.00

Memo Item

C. Green, Frank, J., , FACC

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

Mailing Address 10590 N Meridian St

City Indianapolis State IN Zip Code 46290-1028

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

Name of Employer (for Individual) The Care Group Occupation (for Individual) ADULT CARDIOLOGY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 05 / 2018

Transaction ID : B59D2907C993AEE10D5

Amount of Each Receipt this Period 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1210.00
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 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Greenberg, Harold, L., , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 Springside Rd
 City Longwood State FL Zip Code 32779-4985
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 24 / 2018**
Transaction ID : CAF92A1AA3D86DAA1A8
 Amount of Each Receipt this Period **250.00**
 Memo Item

B. Hart, Linda, Lee, , RN,ACNP-BC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 Wood Rd
 City Richmond State VA Zip Code 23229-7539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bon Secours Heart and Vascular Institutu Occupation (for Individual) HEART FAILURE/TRANSPLANT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **935.00**

Date of Receipt **10 / 23 / 2018**
Transaction ID : 40EC84152AB7650828A9
 Amount of Each Receipt this Period **85.00**
 Memo Item

c. Hart, Linda, Lee, , RN,ACNP-BC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 Wood Rd
 City Richmond State VA Zip Code 23229-7539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bon Secours Heart and Vascular Institutu Occupation (for Individual) HEART FAILURE/TRANSPLANT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **935.00**

Date of Receipt **11 / 23 / 2018**
Transaction ID : 4306A666A9C531FD6EB0
 Amount of Each Receipt this Period **85.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	420.00
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 18 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Hendel, Robert, C., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1430 Tulane Ave
 Ste 7550
 City New Orleans State LA Zip Code 70112-2632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tulane University Heart & Vascular Ins Occupation (for Individual) CLINICAL CARDIOLOGY/GENERAL C
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 24 / 2018
Transaction ID : C0581A07DD1A71837B0
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Huber, Kenneth, Christopher, , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 Ward Pkwy
 City Kansas City State MO Zip Code 64112-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cardiovascular Consults., Inc. Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018
Transaction ID : 5F35CDF6340848B1649
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Humiston, Daniel, J., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 W Bourne Cir
 Ste 200
 City Farmington State UT Zip Code 84025-3657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Utah Cardiology, PC Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2291.63

Date of Receipt 11 / 15 / 2018
Transaction ID : 4C009CCC09B5E6503586
 Amount of Each Receipt this Period 208.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	708.33
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 19 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Jackson, Charles, F., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 Benvenue Dr SE

City Rome	State GA	Zip Code 30161-6224
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

Transaction ID : 1C50D30C-2653-4F74-

Amount of Each Receipt this Period
250.00

Memo Item

B. Jones, Samuel, O., MPH, FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 Folts Cir

City Chattanooga	State TN	Zip Code 37415-6118
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Chattanooga Heart Institute	Occupation (for Individual) ELECTROPHYSIOLOGY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
759.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2018

Transaction ID : 48C4A20D79437DB5D476

Amount of Each Receipt this Period
41.66

Memo Item

C. Jones, Samuel, O., MPH, FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2909 Folts Cir

City Chattanooga	State TN	Zip Code 37415-6118
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Chattanooga Heart Institute	Occupation (for Individual) ELECTROPHYSIOLOGY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
759.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : 4C7FA6A6F529A6A65357

Amount of Each Receipt this Period
41.66

Memo Item

SUBTOTAL of Receipts This Page (optional).....	333.32
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 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Kalynych, Anna, M., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 Montclair Dr NE
 City Atlanta State GA Zip Code 30309-1527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Piedmont Heart Institute Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2018
Transaction ID : 32D5A6979B247CB957E
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Kay, Martin, M., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Cedar Ln
 City Sands Point State NY Zip Code 11050-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYU Langone Cardiovascular Associates Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2018
Transaction ID : FFA6EAE23AF6055B389
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Keelan, Michael, H., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13130 Watertown Plank Rd Unit 111
 City Elm Grove State WI Zip Code 53122-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2018
Transaction ID : D726A92D56A305FC52F
 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 21 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Khouri, Samer, J., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3340 Charter Oak Dr

City Maumee	State OH	Zip Code 43537-9452
----------------	-------------	------------------------

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

Name of Employer (for Individual) University of Toledo	Occupation (for Individual) NON-INVASIVE CARDIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
819.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2018

Transaction ID : 42D7A511DC6DB28876C3

Amount of Each Receipt this Period
91.00

Memo Item

B. Kithcart, Aaron, P., , MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 Dalton St
Apt 2308

City Boston	State MA	Zip Code 02115-3182
----------------	-------------	------------------------

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

Name of Employer (for Individual) Brigham & Women's Hospital	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
959.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2018

Transaction ID : 4B48AD3BB60A5CBA7D5A

Amount of Each Receipt this Period
41.66

Memo Item

C. Kithcart, Aaron, P., , MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 Dalton St
Apt 2308

City Boston	State MA	Zip Code 02115-3182
----------------	-------------	------------------------

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

Name of Employer (for Individual) Brigham & Women's Hospital	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
959.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2018

Transaction ID : 48A4896C308AC568B61D

Amount of Each Receipt this Period
41.66

Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.32
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 22 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Kort, Smadar, , , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 Corporate Dr
 Apt 522
 City Westbury State NY Zip Code 11590-6717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stony Brook University Medical Center Occupation (for Individual) ECHOCARDIOGRAPHY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt 11 / 09 / 2018
Transaction ID : 4E649910158B24A47B03
 Amount of Each Receipt this Period 83.34
 Memo Item

B. Lancaster, Gilead, I., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Mine Hill Rd
 City Redding State CT Zip Code 06896-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bridgeport Hospital Dept of Echo Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 10 / 23 / 2018
Transaction ID : 423B83515A7789F3B562
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Lancaster, Gilead, I., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Mine Hill Rd
 City Redding State CT Zip Code 06896-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bridgeport Hospital Dept of Echo Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 11 / 23 / 2018
Transaction ID : 456691F3B1B922F7968E
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	253.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Learn, Christopher, , , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 Fruit St
Yawkey 5B

City Boston State MA Zip Code 02114-2621

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

Name of Employer (for Individual) Massachusetts General Hospital Occupation (for Individual) ADULT CONGENITAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 19 / 2018
Transaction ID : 4241B82DAE3358B9BEE5

Amount of Each Receipt this Period 25.00

Memo Item

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

Mailing Address 55 Fruit St
Yawkey 5B

City Boston State MA Zip Code 02114-2621

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

Name of Employer (for Individual) Massachusetts General Hospital Occupation (for Individual) ADULT CONGENITAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 19 / 2018
Transaction ID : 40919655BD2CCD5351ED

Amount of Each Receipt this Period 25.00

Memo Item

C. Lewis, Gregory, McKinnon, , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 237 E Hickory St

City Hinsdale State IL Zip Code 60521-3711

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

Name of Employer (for Individual) Self-Employed Occupation (for Individual) ADULT CARDIOLOGY

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2018
Transaction ID : 43E38DB409F3634E5369

Amount of Each Receipt this Period 125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 175.00

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 24 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Lewis, Stephen, John, , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6824 Miami Bluff Dr
 City Cincinnati State OH Zip Code 45227-4331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cardiology Center of Cincinnati Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2018
Transaction ID : 7F18F967B42FD1672FA
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Liberman, Joshua, D., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10711 N Gazebo Hill Pkwy W
 City Mequon State WI Zip Code 53092-5180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Columbia St. Mary's Hospital Occupation (for Individual) PREVENTIVE CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 11 / 01 / 2018
Transaction ID : 42E9BF12FA89DBC79D34
 Amount of Each Receipt this Period 87.50
 Memo Item

C. Lies, James, E., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 White Ln
 City Saint Helena State CA Zip Code 94574-1549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St Helena Cardiology Associates Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2018
Transaction ID : 79ECF226C044588870D
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	587.50
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 25 OF 45
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Mankad, Sunil, V., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2520 Salem Heights Ln SW

City Rochester	State MN	Zip Code 55902-4303
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Mayo Clinic	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		23		2018

Transaction ID : 4FCF977197562EA24FFE

Amount of Each Receipt this Period
85.00

Memo Item

B. Mankad, Sunil, V., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2520 Salem Heights Ln SW

City Rochester	State MN	Zip Code 55902-4303
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Mayo Clinic	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		23		2018

Transaction ID : 42EB98100232053F6818

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address 6273 Crooked Stick Cir

City Stockton	State CA	Zip Code 95219-1858
------------------	-------------	------------------------

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

Name of Employer (for Individual) Manshadi Heart Institute	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1874.97

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		23		2018

Transaction ID : 4E8EAEF2BE68BC48A0DC

Amount of Each Receipt this Period
208.33

Memo Item

SUBTOTAL of Receipts This Page (optional).....	378.33
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 26 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Manshadi, Ramin, , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6273 Crooked Stick Cir

City Stockton	State CA	Zip Code 95219-1858
------------------	-------------	------------------------

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

Name of Employer (for Individual) Manshadi Heart Institute	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1874.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : 4D2185E1AECDC77A4982

Amount of Each Receipt this Period
208.33

Memo Item

B. Mehta, Laxmi, S., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5037 Canterbury Dr

City Powell	State OH	Zip Code 43065-8615
----------------	-------------	------------------------

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

Name of Employer (for Individual) Ohio State University	Occupation (for Individual) PREVENTIVE CARDIOLOGY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
754.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : 45F89D2249B87BB351A2

Amount of Each Receipt this Period
83.85

Memo Item

c. Murray, David, R., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3043 Hartwicke Dr

City Fitchburg	State WI	Zip Code 53711-6935
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) CLINICAL CARDIOLOGY/GENERAL C/
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

Transaction ID : 4274EF4F2EE01C1D2C6

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	542.18
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 27 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Nocero, Michael, A., , MACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 Satsuma Dr
 City Altamonte Springs State FL Zip Code 32714-6505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Michael A Nocero Jr MD MACC PA Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2018
Transaction ID : 7D670680F65236C5C79
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Noonan, Daniel, K. P., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2697 N Woodview Pl
 City Boise State ID Zip Code 83702-6541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St. Luke's Idaho Cardiology Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2018
Transaction ID : 44D19706B508188F626F
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Novak, Holly, , , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4009 Southwoods Rd
 City Springfield State IL Zip Code 62711-8164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prairie Cardiovascular Consultants Occupation (for Individual) PREVENTIVE CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 24 / 2018
Transaction ID : 36B23BB2E1BEEC71F9B
 Amount of Each Receipt this Period 235.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1335.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Ownby, Evan, D., , FACC

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

Mailing Address 4408 Gladwood Pl

City Lynchburg	State VA	Zip Code 24503-2020
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Stroobants Cardiovascular Center	Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1098.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : 470B96662D1784B2DC8E

Amount of Each Receipt this Period
85.00

Memo Item

B. Ownby, Evan, D., , FACC

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

Mailing Address 4408 Gladwood Pl

City Lynchburg	State VA	Zip Code 24503-2020
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Stroobants Cardiovascular Center	Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1098.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2018

Transaction ID : 48098E5C26B6C0B6DB07

Amount of Each Receipt this Period
85.00

Memo Item

c. Patel, Pranav, M., , FACC

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

Mailing Address 333 City Blvd W
Ste 400

City Orange	State CA	Zip Code 92868-2994
----------------	-------------	------------------------

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

Name of Employer (for Individual) University of California, Irvine	Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : 4FED9C9DC8518C4B9E4E

Amount of Each Receipt this Period
120.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.00
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 29 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Poku, Joseph, W., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 639 Hemlock St
 Ste 100
 City Macon State GA Zip Code 31201-6889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Georgia Arrhythmia Consultants Occupation (for Individual) ELECTROPHYSIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 16 / 2018
Transaction ID : 9463804C-9C65-4C88-
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Ratner, Scott, J., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 Franklin Ave
 City Franklin Square State NY Zip Code 11010-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Scott J Ratner MD PC Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 18 / 2018
Transaction ID : C52AA69D-D33E-4363-
 Amount of Each Receipt this Period 1500.00
 Memo Item

c. Rodgers, George, P., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2441 Westlake Dr
 City Austin State TX Zip Code 78746-2950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Seton Heart Institute Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 10 / 23 / 2018
Transaction ID : 4F058C5246D3DA3504CE
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Rodgers, George, P., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2441 Westlake Dr
 City Austin State TX Zip Code 78746-2950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Seton Heart Institute Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 11 / 23 / 2018
Transaction ID : 447F9F455B2DF7352A14
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Stark, Randall, P., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5755 Long Brake Cir S
 City Edina State MN Zip Code 55439-2619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Metropolitan Heart & Vascular Institut Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 604.15

Date of Receipt 10 / 27 / 2018
Transaction ID : 46CB81C9A2FFEB41C210
 Amount of Each Receipt this Period 20.83
 Memo Item

C. Strobel, John, S., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3407 E Olcott Blvd
 City Bloomington State IN Zip Code 47401-2429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IU Health SIP Occupation (for Individual) ELECTROPHYSIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 24 / 2018
Transaction ID : 23E99895B32830CFACB
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.83
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 31 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Strosahl, Kurt, F., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1309 Woody Ridge Ct

City Chesapeake	State VA	Zip Code 23322-2246
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Cardiovascular Associates	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : 4F6714CD1C64E5137BE

Amount of Each Receipt this Period
500.00

Memo Item

B. Thomas, Suma, A., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 W Lakeside Ave
Apt 801

City Cleveland	State OH	Zip Code 44113-5517
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2291.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : 4CD39443AFADC51EFE22

Amount of Each Receipt this Period
208.34

Memo Item

C. Thomas, Suma, A., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 W Lakeside Ave
Apt 801

City Cleveland	State OH	Zip Code 44113-5517
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2291.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2018

Transaction ID : 491695BEFC3D327C5065

Amount of Each Receipt this Period
208.34

Memo Item

SUBTOTAL of Receipts This Page (optional).....	916.68
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 32 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Trask, Neil, W., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9310 Cove Dr

City Myrtle Beach	State SC	Zip Code 29572-5000
----------------------	-------------	------------------------

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

Name of Employer (for Individual) McLeod Cardiology Associates	Occupation (for Individual) ADULT CARDIOLOGY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

Transaction ID : A86E7893FDAB97E73CB

Amount of Each Receipt this Period
250.00

Memo Item

B. Waites, Thad, F., , MACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1017 Richburg Rd

City Hattiesburg	State MS	Zip Code 39402-9055
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Forrest General/Hattiesburg Clinic	Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2916.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : 41C28814385C5DF9ED6B

Amount of Each Receipt this Period
416.66

Memo Item

c. Walsh, Mary, Norine, , MACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8333 Naab Rd
Ste 400

City Indianapolis	State IN	Zip Code 46260-1992
----------------------	-------------	------------------------

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

Name of Employer (for Individual) St Vincent Heart Center of Indiana	Occupation (for Individual) HEART FAILURE/TRANSPLANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : 41AAADCA4BE41058B597

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	766.66
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 33 OF 45
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. West, Steven, R., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 425 Mutton Creek Dr

City Seymour	State IN	Zip Code 47274-4039
-----------------	-------------	------------------------

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

Name of Employer (for Individual) St. Vincent Medical Group	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : 4C78BDBAD905E0ADAFF7

Amount of Each Receipt this Period
20.84

Memo Item

B. West, Steven, R., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 425 Mutton Creek Dr

City Seymour	State IN	Zip Code 47274-4039
-----------------	-------------	------------------------

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

Name of Employer (for Individual) St. Vincent Medical Group	Occupation (for Individual) ADULT CARDIOLOGY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
635.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : 4F4E83FC69324D626215

Amount of Each Receipt this Period
26.08

Memo Item

C. White, Michael, D., , FACC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13305 Paul St

City Omaha	State NE	Zip Code 68154-5148
---------------	-------------	------------------------

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

Name of Employer (for Individual) Creighton University	Occupation (for Individual) INTERVENTIONAL CARDIOLOGY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : 4C878CCB371773399607

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	146.92
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 34 OF 45
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Widmer, Michael, C., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2753 NE Red Oak Dr
 City Bend State OR Zip Code 97701-8348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) High Lakes Health Care Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 749.97

Date of Receipt 10 / 28 / 2018
Transaction ID : 4A27A8D402F050B8ACA3
 Amount of Each Receipt this Period 83.33
 Memo Item

B. Wilson, B. Hadley, , , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 Blythe Blvd Ste 300
 City Charlotte State NC Zip Code 28203-5863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sanger Heart & Vascular Institute/Atri Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1875.06

Date of Receipt 10 / 31 / 2018
Transaction ID : 47AFB5F4B9746C3A505D
 Amount of Each Receipt this Period 208.34
 Memo Item

C. Wright, Richard, F., , FACC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1038 S Carmelina Ave
 City Los Angeles State CA Zip Code 90049-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pacific Heart Institute Occupation (for Individual) ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 10 / 31 / 2018
Transaction ID : 4685BE802A4EA6A00958
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	441.67
TOTAL This Period (last page this line number only).....	18355.56

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 45
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. BB&T

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

Mailing Address 1909 K St NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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 ▼
2629.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2018

Transaction ID : C36FD62D37818BFDF2F

Amount of Each Receipt this Period
911.47

Memo Item
Reimbursement for 10/2 & 10/15 Fees

B. BB&T

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

Mailing Address 1909 K St NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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 ▼
2629.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : 7A3B39202DCD7D8CC38

Amount of Each Receipt this Period
1010.85

Memo Item
Reimbursement for 11/2 & 11/15 Fees

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1922.32
TOTAL This Period (last page this line number only).....	1922.32

**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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K St NW

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C []

Transaction ID : 2EB786EAD2

Amount of Each Disbursement this Period

122.98

Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1909 K St NW

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C []

Transaction ID : AA8AD4D6C9

Amount of Each Disbursement this Period

887.87

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	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

--

Memo Item

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

1010.85

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

1010.85

**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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Innovation Political Action Committee (AMI PAC)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

Mailing Address PO Box 582496

FEC Identification Number

C C00561779

Transaction ID : D734F0EF2A
Amount of Each Disbursement this Period

2500.00

Memo Item

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement
2018 Contribution

011
Category/
Type

Candidate Name
American Innovation Political Action Committee (AMI PAC)

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

Full Name (Last, First, Middle Initial)

B. Bilirakis For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

Mailing Address PO Box 606

FEC Identification Number

C C00408534

Transaction ID : C8C6FE0222f
Amount of Each Disbursement this Period

2500.00

Memo Item

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Bilirakis, Gus, Michael, ,

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

State: FL District: 12

Full Name (Last, First, Middle Initial)

C. Bluegrass Committee

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

Mailing Address 228 S. Washington St., Ste. 115

FEC Identification Number

C C00235655

Transaction ID : 0BCABE36C
Amount of Each Disbursement this Period

5000.00

Memo Item

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
2018 Contribution

011
Category/
Type

Candidate Name
Bluegrass Committee

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

State: District:

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

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

10000.00

**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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Blumenauer For Congress		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 901 SE Oak Street Suite 105		FEC Identification Number C C00307314 Transaction ID : 308293C5864
City Portland	State OR	Zip Code 97214
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Blumenauer, Earl, Francis, ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OR	District: 03	

Full Name (Last, First, Middle Initial) B. Byrne For Congress		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018
Mailing Address PO Box 2743		FEC Identification Number C C00545673 Transaction ID : 7D67AB9460/
City Mobile	State AL	Zip Code 36652
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Byrne, Bradley, Roberts, ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AL	District: 01	

Full Name (Last, First, Middle Initial) C. Carper For Senate		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address PO Box 2882		FEC Identification Number C C00349217 Transaction ID : C5924E7805/
City Wilmington	State DE	Zip Code 19805
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Carper, Thomas, Richard, ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: DE	District:	

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

5500.00

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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Castor For Congress

Mailing Address 301 W Platt Street, #385

City
Tampa

State
FL

Zip Code
33606

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Castor, Katherine, Anne, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C C00410761

Transaction ID : F9E11729470

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cathy McMorris Rodgers For Congress

Mailing Address Box 137

City
Spokane

State
WA

Zip Code
99210-0137

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

McMorris Rodgers, Cathy, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: WA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C C00390476

Transaction ID : AD0528BAB7

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Linda Sanchez

Mailing Address PO Box 15320

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Sanchez, Linda, T., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 38

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C C00384057

Transaction ID : A1A52926521

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7500.00

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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democrats Reshaping America (DREAMPAC)

Mailing Address PO Box 15320

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Democrats Reshaping America (DREAMPAC)

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C00423079

Transaction ID : 575C05011C

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Doing Right - Results Action Unity Leadership PAC Dr Raul PAC

Mailing Address PO Box 3433

City
Palm Desert

State
CA

Zip Code
92261

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

Doing Right - Results Action Unity Leadership PAC Dr Raul PAC

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C00569871

Transaction ID : 1CBCCFC29A

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Dr John Joyce For Congress

Mailing Address 1002 Logan Blvd
Ste 114 #237

City
Altoona

State
PA

Zip Code
16602

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Joyce, John, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: PA

District: 13

Contribution

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C00674259

Transaction ID : 42A0684E02

Amount of Each Disbursement this Period

1000.00

Memo Item

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Susan Brooks

Mailing Address 9425 N Meridian St
237

City Indianapolis

State IN

Zip Code 46260-1308

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Brooks, Susan, W., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IN District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C C00500207

Transaction ID : 60A65F1D32

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. George Holding For Congress Inc.

Mailing Address PO Box 97187

City Raleigh

State NC

Zip Code 27624

Purpose of Disbursement
2018 General

011

Category/
Type

Candidate Name

Holding, George, E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C C00499236

Transaction ID : B81CF175935

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HEARTDOCPAC

Mailing Address PO Box 250

City Newburgh

State IN

Zip Code 47629-0250

Purpose of Disbursement
2018 Contribution

011

Category/
Type

Candidate Name

HEARTDOCPAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C C00523381

Transaction ID : B396C6FC07

Amount of Each Disbursement this Period

2500.00

Memo Item

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. John Carter For Congress		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 201 University Oaks Blvd. Suite 540 # 148		FEC Identification Number C C00371203 Transaction ID : 0FB7B70B25 Amount of Each Disbursement this Period 1000.00
City Round Rock State TX Zip Code 78665	Purpose of Disbursement 2018 General	Category/Type 011
Candidate Name Carter, John, R., ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: TX District: 31	

Full Name (Last, First, Middle Initial) B. Kaine For Virginia		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 1751 Potomac Greens Drive		FEC Identification Number C C00495358 Transaction ID : 35F5FF524E4 Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement 2018 General	Category/Type 011
Candidate Name Kaine, Timothy, Michael, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: VA District:	

Full Name (Last, First, Middle Initial) C. Kind For Congress Committee		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 205 5Th Avenue S Room 411		FEC Identification Number C C00312017 Transaction ID : 23EF4260AF Amount of Each Disbursement this Period 1500.00
City La Crosse State WI Zip Code 54601	Purpose of Disbursement 2018 General	Category/Type 011
Candidate Name Kind, Ronald, James, ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: WI District: 03	

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

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

3500.00

**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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marsha For Senate

Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Blackburn, Marsha, Wedgeworth, ,

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

State: TN District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C C00376939

Transaction ID : A623B173BE

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
2018 General

011
Category/
Type

Candidate Name
Thompson, Michael, C., ,

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

State: CA District: 05

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2018

FEC Identification Number

C C00326363

Transaction ID : 4C0D9F5E33f

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. 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
11 / 02 / 2018

FEC Identification Number

C C00412304

Transaction ID : 2E62F76399f

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)..... ▶

7000.00

**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 College of Cardiology Political Action Committee

A. Morgan Griffith For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 361

City Christiansburg State VA Zip Code 24068

Purpose of Disbursement 2018 General

Candidate Name Griffith, H. Morgan, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: VA District: 09

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C00477240
Transaction ID : F3A213D2E9!

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. People For Ben

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement 2018 General

Candidate Name Lujan, Ben, Ray, ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NM District: 03

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C00443689
Transaction ID : F32CA02E77!

Amount of Each Disbursement this Period: 4000.00

Memo Item

C. Pete Sessions For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 823047

City Dallas State TX Zip Code 75382-3047

Purpose of Disbursement 2018 General

Candidate Name Sessions, Peter, Anderson, ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: TX District: 32

Date of Disbursement: 11 / 02 / 2018

FEC Identification Number: C00303305
Transaction ID : B2A6A373FC

Amount of Each Disbursement this Period: 2500.00

Memo Item

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

7500.00

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 College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard E Neal For Congress Committee		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 76 Magnolia Terrace		FEC Identification Number C00226522 Transaction ID : 73894C6746E Amount of Each Disbursement this Period 5000.00
City Springfield	State MA	Zip Code 01108
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Neal, Richard, Edmund, ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 01	

Full Name (Last, First, Middle Initial) B. Sherman For Congress		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018
Mailing Address 777 S. Figueroa Street Suite 4050		FEC Identification Number C00308742 Transaction ID : 5DBD1E2970' Amount of Each Disbursement this Period 1000.00
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Sherman, Bradley, James, ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 30	

Full Name (Last, First, Middle Initial) C. Volunteers For Shimkus		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address PO Box 661		FEC Identification Number C00258855 Transaction ID : 353C718359E Amount of Each Disbursement this Period 2500.00
City Collinsville	State IL	Zip Code 62234-0661
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name Shimkus, John, M., ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 15	

SUBTOTAL of Disbursements This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	60500.00