

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American College of Radiology Association 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="2009"/>		336659.40
(b) Cash on Hand at Beginning of Reporting Period.....	553170.57	
(c) Total Receipts (from Line 19)	48544.39	1032596.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	601714.96	1369256.00
7. Total Disbursements (from Line 31).....	102964.53	870143.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	498750.43	499112.43
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 Radiology Association 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).....	43586.64	901979.80
(ii) Unitemized	4943.00	126354.10
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	48529.64	1028333.90
(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)	48529.64	1028333.90
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	3500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	14.75	762.70
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))..... ▶	48544.39	1032596.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	48544.39	1032596.60

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	464.53	10106.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	464.53	10106.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	102500.00	856500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	3536.66
(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	3536.66
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	102964.53	870143.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	102964.53	870143.57

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	48529.64	1028333.90
34. Total Contribution Refunds (from Line 28(d))	0.00	3536.66
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48529.64	1024797.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	464.53	10106.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	464.53	10106.91

**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 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 Radiology Association Political Action Committee

A. Ole Sami Aassar
 Full Name (Last, First, Middle Initial)
 Mailing Address 1031 Ardsley Rd
 City Charlotte State NC Zip Code 28207-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **248.00**

Date of Receipt **11 / 11 / 2009**
Transaction ID : 32282894
 Amount of Each Receipt this Period **185.00**

B. Neal Abdullah
 Full Name (Last, First, Middle Initial)
 Mailing Address 3115 Forrester S
 City Bloomington State IN Zip Code 47401-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southern Indiana Radiological Associat Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 05 / 2009**
Transaction ID : 32234123
 Amount of Each Receipt this Period **250.00**

C. Ira Adler
 Full Name (Last, First, Middle Initial)
 Mailing Address 879 Lexington Dr
 City Greenville State NC Zip Code 27834-0549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Eastern Radiologists Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt **11 / 15 / 2009**
Transaction ID : 32305221
 Amount of Each Receipt this Period **40.00**

SUBTOTAL of Receipts This Page (optional)..... **475.00**
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 7 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Deborah Agisim
 Full Name (Last, First, Middle Initial)
 Mailing Address 5600 Laurium Rd
 City Charlotte State NC Zip Code 28226-5610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475576
 Amount of Each Receipt this Period
400.00

B. Christopher Ahmed
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Royal Highlands Ln
 City Dothan State AL Zip Code 36305-9345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Dothan, P.C. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32518809
 Amount of Each Receipt this Period
250.00

C. Jorge Albin
 Full Name (Last, First, Middle Initial)
 Mailing Address 645 Mulberry Ln
 City Bellaire State TX Zip Code 77401-3803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Greater Houston Radiology Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **416.70**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2009
Transaction ID : 32305235
 Amount of Each Receipt this Period
41.67

SUBTOTAL of Receipts This Page (optional).....	331.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 Radiology Association Political Action Committee

A. Julia Alexander
Full Name (Last, First, Middle Initial)
Mailing Address 211 Asphodel Dr
City Dothan State AL Zip Code 36303-2984
FEC ID number of contributing federal political committee. **C**
Name of Employer Radiology Associates of Dothan, P.C. Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32518812
Amount of Each Receipt this Period **250.00**

B. William Allen Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 20050 NW 10th St
City Pratt State KS Zip Code 67124-7721
FEC ID number of contributing federal political committee. **C**
Name of Employer United Radiology Group Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32475461
Amount of Each Receipt this Period **100.00**

C. Henry Alperin
Full Name (Last, First, Middle Initial)
Mailing Address 1 Eagleton Ct
City Augusta State GA Zip Code 30909-1803
FEC ID number of contributing federal political committee. **C**
Name of Employer Brown and Associates Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 17 / 2009**
Transaction ID : 32305522
Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **850.00**
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 9 OF 85
	<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 Radiology Association Political Action Committee

A. Eric Alpert
Full Name (Last, First, Middle Initial)

Mailing Address 3219 Seven Eagles Rd

City Charlotte State NC Zip Code 28210-5938

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2009

Transaction ID : 32282895

Amount of Each Receipt this Period
 126.00

B. Mark Alson
Full Name (Last, First, Middle Initial)

Mailing Address 6641 N Forkner Ave

City Fresno State CA Zip Code 93711-1326

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

Name of Employer Sierra Imaging Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2009

Transaction ID : 32475560

Amount of Each Receipt this Period
 50.00

C. Raymond A. Armstrong
Full Name (Last, First, Middle Initial)

Mailing Address Radiology of Huntsville
2006 Franklin St SE Ste 200

City Huntsville State AL Zip Code 35801-4537

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

Name of Employer Baptist Medical Ctr-Montclair Occupation Diagnostic Radiologist

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 / 15 / 2009

Transaction ID : 32305250

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	276.00
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 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lawrence Arrington

Mailing Address 137 Lakemont Dr

City State Zip Code
Augusta GA 30904-3175

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

Name of Employer Occupation
Brown and Associates Diagnostic Radiologist

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
11 / 17 / 2009
Transaction ID : 32305531

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Carl Bailey Jr.

Mailing Address 710 Bunkers Cove Rd

City State Zip Code
Panama City FL 32401-3920

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

Name of Employer Occupation
Bay Radiology Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2009
Transaction ID : 32519845

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Amir Batouli

Mailing Address 324 Lantern Lane

City State Zip Code
Chambersburg PA 17201-3299

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

Name of Employer Occupation
Chambersburg Imaging Associates Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2009
Transaction ID : 32305486

Amount of Each Receipt this Period
260.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 860.00

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 11 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Jose Bauza		Date of Receipt 11 / 17 / 2009 Transaction ID : 32305523
Mailing Address 3880 Inverness Way		Amount of Each Receipt this Period 500.00
City Martinez	State GA	Zip Code 30907-9433
FEC ID number of contributing federal political committee. C	Name of Employer Brown and Associates	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. William Beckett Jr.		Date of Receipt 11 / 30 / 2009 Transaction ID : 32518813
Mailing Address Radiology Associates of Dothan 1900 Fairview Ave		Amount of Each Receipt this Period 250.00
City Dothan	State AL	Zip Code 36301-3008
FEC ID number of contributing federal political committee. C	Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ross Bellavia		Date of Receipt 11 / 11 / 2009 Transaction ID : 32282896
Mailing Address 8618 Longview Club Dr		Amount of Each Receipt this Period 374.00
City Waxhaw	State NC	Zip Code 28173-6821
FEC ID number of contributing federal political committee. C	Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1124.00
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 12 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Andrew Beloni			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305220		
Mailing Address 5624 Laurium Rd			Amount of Each Receipt this Period 45.00		
City Charlotte	State NC	Zip Code 28226-5610			
FEC ID number of contributing federal political committee. C					
Name of Employer Charlotte Radiology		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 495.00			

Full Name (Last, First, Middle Initial) B. Mark Bernardy			Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475448		
Mailing Address 131 Barrington Hall Dr			Amount of Each Receipt this Period 250.00		
City Eatonton	State GA	Zip Code 31024-5459			
FEC ID number of contributing federal political committee. C					
Name of Employer Self-Employed		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

Full Name (Last, First, Middle Initial) C. Emily Billingsley			Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32520074		
Mailing Address 449 Sudduth Ave			Amount of Each Receipt this Period 100.00		
City Panama City	State FL	Zip Code 32401-3958			
FEC ID number of contributing federal political committee. C					
Name of Employer Bay Radiology Associates		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00			

SUBTOTAL of Receipts This Page (optional).....▶	395.00
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 13 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Marcela Bohm-Velez
 Full Name (Last, First, Middle Initial)
 Mailing Address Weinstein Imaging Associates
 5850 Centre Ave
 City Pittsburgh State PA Zip Code 15206-3780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Weinstein Imaging Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1833.37**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32475593
 Amount of Each Receipt this Period **166.67**

B. J. Scott Bolton
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Marigold Ln
 City Dothan State AL Zip Code 36305-5843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Dothan, P.C. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32518814
 Amount of Each Receipt this Period **250.00**

C. Michael Hamilton Brannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Foxglove Ct
 City Greenville State SC Zip Code 29615-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Greenville Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **462.00**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32475562
 Amount of Each Receipt this Period **42.00**

SUBTOTAL of Receipts This Page (optional).....	458.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. David Brill		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305487
Mailing Address 828 S 5th St		Amount of Each Receipt this Period 250.00
City Chambersburg	State PA	Zip Code 17201-3747
FEC ID number of contributing federal political committee. C		
Name of Employer Chambersburg Imaging Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. David Brink		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32518815
Mailing Address 106 Nottoway Blvd		Amount of Each Receipt this Period 250.00
City Dothan	State AL	Zip Code 36303-2978
FEC ID number of contributing federal political committee. C		
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. William Brooks III		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305533
Mailing Address PO Box 2172		Amount of Each Receipt this Period 500.00
City Augusta	State GA	Zip Code 30903-2172
FEC ID number of contributing federal political committee. C		
Name of Employer Brown Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 15 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Jason Browning
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 Sunset Ln
 City Lynn Haven State FL Zip Code 32444-3455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bay Radiology Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1100.00**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32520173
 Amount of Each Receipt this Period **100.00**

B. David Buck
 Full Name (Last, First, Middle Initial)
 Mailing Address 272 Harrison Rd
 City Turtle Creek State PA Zip Code 15145-1042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiologic Consultants, Ltd. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **334.62**

Date of Receipt **11 / 15 / 2009**
Transaction ID : 32305222
 Amount of Each Receipt this Period **30.42**

C. Huey Bullock
 Full Name (Last, First, Middle Initial)
 Mailing Address 3996 Hammonds Fry
 City Evans State GA Zip Code 30809-8025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brown and Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 17 / 2009**
Transaction ID : 32305538
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **630.42**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. William Campbell Jr.		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32519844
Mailing Address Bay Radiology Associates, PA 527 N Palo Alto Ave		Amount of Each Receipt this Period 100.00
City Panama City	State FL	
Zip Code 32401-3639		Aggregate Year-to-Date ▼ 1100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Christina Chaconas		Date of Receipt M M / D D / Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282897
Mailing Address 3908 Foxcroft Rd		Amount of Each Receipt this Period 374.00
City Charlotte	State NC	
Zip Code 28211-3757		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kerry Chandler		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475614
Mailing Address 4100 Mullcroft Pl		Amount of Each Receipt this Period 50.00
City Fuquay Varina	State NC	
Zip Code 27526-8658		Aggregate Year-to-Date ▼ 550.00
FEC ID number of contributing federal political committee. C		
Name of Employer Wake Radiology Consultants	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	524.00
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 85
	<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 Radiology Association Political Action Committee

A. C. Peter Chang
 Full Name (Last, First, Middle Initial)
 Mailing Address 7113 Fairway Vista Dr
 City Charlotte State NC Zip Code 28226-6870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology, P.A. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2009
Transaction ID : 32282898
 Amount of Each Receipt this Period
 374.00

B. Jugesh Cheema
 Full Name (Last, First, Middle Initial)
 Mailing Address 2466 Oak Bend Pl
 City Newburgh State IN Zip Code 47630-8053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical Center of Delaware Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2009
Transaction ID : 32305230
 Amount of Each Receipt this Period
 60.00

C. Raja Sekhar Cheruvu
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 Via Foresta Ln
 City Williamsville State NY Zip Code 14221-1984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Windsong Radiology Group Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2009
Transaction ID : 32305239
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	484.00
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 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Karl Chiang
Full Name (Last, First, Middle Initial)

Mailing Address Eastern Radiologists Inc
9 Doctors Park

City Greenville State NC Zip Code 27834-2801

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

Name of Employer Eastern Radiologists Inc Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2009
Transaction ID : 32454831

Amount of Each Receipt this Period
84.00

B. Karl Chiang
Full Name (Last, First, Middle Initial)

Mailing Address Eastern Radiologists Inc
9 Doctors Park

City Greenville State NC Zip Code 27834-2801

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

Name of Employer Eastern Radiologists Inc Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475601

Amount of Each Receipt this Period
40.00

C. Henry Ching
Full Name (Last, First, Middle Initial)

Mailing Address 854 Rosewood Ct

City Chambersburg State PA Zip Code 17201-2891

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

Name of Employer Chambersburg Imaging Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2009
Transaction ID : 32305490

Amount of Each Receipt this Period
260.00

SUBTOTAL of Receipts This Page (optional).....▶	384.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Jonathan Clemente		Date of Receipt M M / D D / Y Y Y Y Y 11 / 11 / 2009
Mailing Address 1620 Biltmore Drive		Transaction ID : 32282899
City Charlotte	State NC	Zip Code 28207-2612
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 374.00	
Name of Employer NYU/Bellevue/VA Medical Center	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Daniel Cohen		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2009
Mailing Address 1480 Brookfield Rd		Transaction ID : 32305238
City Yardley	State PA	Zip Code 19067-3930
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00	
Name of Employer Radiology Affiliates of Central New Je	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Kevin Cregan		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2009
Mailing Address Wayne Radiologists 2700 Med Office Pl		Transaction ID : 32301362
City Goldsboro	State NC	Zip Code 27534-9460
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Wayne Radiologists	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	664.00
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 20 OF 85
	<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"/>	<input type="checkbox"/> 17

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

A. Roger Cronk
Full Name (Last, First, Middle Initial)

Mailing Address 1505 Eagle Ridge Rd NE

City Albuquerque State NM Zip Code 87122-1156

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

Name of Employer X-Ray Associates of NM, PC Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 17 / 2009**

Transaction ID : 32300906

Amount of Each Receipt this Period **250.00**

B. Timothy Crummy
Full Name (Last, First, Middle Initial)

Mailing Address 2509 Middleton Beach Rd

City Middleton State WI Zip Code 53562-2912

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

Name of Employer Madison Radiologists Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **478.50**

Date of Receipt **11 / 15 / 2009**

Transaction ID : 32305223

Amount of Each Receipt this Period **36.50**

C. Carl D'Orsi
Full Name (Last, First, Middle Initial)

Mailing Address Emory Univ Hosp
1701 Uppergate Dr 1st Fl C1104

City Atlanta State GA Zip Code 30322-0001

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

Name of Employer Emory University Hospital Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **341.25**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475580

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **311.50**

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 21 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. Darren M. Davenport

Mailing Address 1948 1st Ave NE

City Cedar Rapids State IA Zip Code 52402-5321

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

Name of Employer Radiology Consultants of Iowa Occupation Diagnostic Radiologist

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
 11 / 30 / 2009
Transaction ID : 32475724

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. James Davis

Mailing Address 52 Chigoe Ln

City Appling State GA Zip Code 30802-3838

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

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
 11 / 17 / 2009
Transaction ID : 32305534

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
c. Christopher Day

Mailing Address 13012 Covered Bridge Rd

City Sellersburg State IN Zip Code 47172-8604

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

Name of Employer Radiology Associates, Inc. Occupation Diagnostic Radiologist

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
 11 / 05 / 2009
Transaction ID : 32234016

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 22 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Gary De Filipp		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2009
Mailing Address Charlotte Radiology PA PO Box 36937		Transaction ID : 32282900
City Charlotte	State NC	Zip Code 28236-6937
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 374.00	
Name of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Raul De La Vega III		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009
Mailing Address 2936 Grampian Dr		Transaction ID : 32305245
City Gastonia	State NC	Zip Code 28054-6402
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 67.50	
Name of Employer Shelby Radiological Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 472.50	

Full Name (Last, First, Middle Initial) C. William Taylor Deeter III		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009
Mailing Address 14 Ryedale Ct		Transaction ID : 32305257
City Greenville	State SC	Zip Code 29615-6037
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.67	
Name of Employer Greenville Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	

SUBTOTAL of Receipts This Page (optional).....▶	483.17
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 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. Michael Downing

Mailing Address Radiology Associates of Dothan
1900 Fairview Ave

City Dothan State AL Zip Code 36301-3008

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

Name of Employer Radiology Associates of Dothan Occupation Diagnostic Radiologist

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
 11 / 30 / 2009
Transaction ID : 32519414

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Warren Elam

Mailing Address 603 High Hampton Drive

City Martinez State GA Zip Code 30907-9149

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

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
 11 / 17 / 2009
Transaction ID : 32305525

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Paul Ellenbogen

Mailing Address 6612 Cliffbrook Dr

City Dallas State TX Zip Code 75254-8613

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

Name of Employer Southwest Imaging & Interven specialis Occupation Diagnostic Radiologist

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 / 15 / 2009
Transaction ID : 32305231

Amount of Each Receipt this Period
208.34

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 24 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Full Name (Last, First, Middle Initial)
A. Edward Fallon III

Mailing Address West Reading Radiology Assoc
301 S 7th Ave

City West Reading State PA Zip Code 19611-1410

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

Name of Employer West Reading Radiology Assoc Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475725

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Peter J.W. Fang

Mailing Address 930 Dewberry Ct

City Chambersburg State PA Zip Code 17201-2870

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

Name of Employer Chambersburg Imaging Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2009
Transaction ID : 32305491

Amount of Each Receipt this Period
260.00

Full Name (Last, First, Middle Initial)
C. Stephen Fernandez

Mailing Address 1900 Fairview Ave

City Dothan State AL Zip Code 36301-3008

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

Name of Employer Radiology Associates of Dothan Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32519415

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	760.00
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 25 OF 85
	<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 Radiology Association Political Action Committee

A. William Fife
Full Name (Last, First, Middle Initial)

Mailing Address 256 NW Pacific Grove Dr

City Beaverton State OR Zip Code 97006-8352

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

Name of Employer LAC/USC Hospital Occupation Diagnostic Radiologist

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
 11 / 15 / 2009
Transaction ID : 32302086

Amount of Each Receipt this Period
 250.00

B. Rita Freimanis
Full Name (Last, First, Middle Initial)

Mailing Address Wake Forest Univ Sch of Medicine Medical Center Blvd

City Winston Salem State NC Zip Code 27157-0001

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

Name of Employer Wake Forest Univ Sch of Medicine Occupation Diagnostic Radiologist

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
 11 / 15 / 2009
Transaction ID : 32305258

Amount of Each Receipt this Period
 25.00

C. Marc Glickstein
Full Name (Last, First, Middle Initial)

Mailing Address 962 Mott Hill Rd

City South Glastonbury State CT Zip Code 06073-3708

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

Name of Employer Jefferson X-Ray Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475599

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Matthew Gromet

Mailing Address **Charlotte Radiology PA**
3030 Latrobe Dr

City **Charlotte** State **NC** Zip Code **28211-4866**

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

Name of Employer **Charlotte Radiology** Occupation **Diagnostic Radiologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
11 / 11 / 2009
Transaction ID : 32282901

Amount of Each Receipt this Period
374.00

Full Name (Last, First, Middle Initial)
B. Adam Guttentag

Mailing Address **Albert Einstein Medical Center**
5501 Old York Rd

City **Philadelphia** State **PA** Zip Code **19141-3018**

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

Name of Employer **Albert Einstein HealthCare Network** Occupation **Diagnostic Radiologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
11 / 03 / 2009
Transaction ID : 32125917

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
c. Jeffrey T. Hall

Mailing Address **St Alphonsus Regional Med Center**
1055 N Curtis Rd

City **Boise** State **ID** Zip Code **83706-1309**

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

Name of Employer **Gem State Radiology** Occupation **Diagnostic Radiologist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1333.34**

Date of Receipt
11 / 03 / 2009
Transaction ID : 32125922

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1624.00
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 27 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Olin Harbury		Date of Receipt 11 / 11 / 2009 Transaction ID : 32282902
Mailing Address Charlotte Radiology 3030 Latrobe Dr		Amount of Each Receipt this Period 374.00
City Charlotte	State NC	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer Mercy Hospital	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. David Harry		Date of Receipt 11 / 15 / 2009 Transaction ID : 32302085
Mailing Address 136 Highview Rd		Amount of Each Receipt this Period 250.00
City Stephenson	State VA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Winchester Medical Center	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Frank Hayden Jr.		Date of Receipt 11 / 03 / 2009 Transaction ID : 32125920
Mailing Address 101 Babbs Hollow		Amount of Each Receipt this Period 500.00
City Greenville	State SC	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer Comanche County Memorial Hospital	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	1124.00
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 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)
A. Scott Hees

Mailing Address 119 Saint Mellions

City Pinehurst State NC Zip Code 28374-8104

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 11 / 2009

Transaction ID : 32282903

Amount of Each Receipt this Period
374.00

Full Name (Last, First, Middle Initial)
B. Kimberly Hendrix

Mailing Address 352 Sycamore Ridge Rd NE

City Concord State NC Zip Code 28025-7806

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

Name of Employer Self-Employed Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **356.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 11 / 2009

Transaction ID : 32282904

Amount of Each Receipt this Period
266.00

Full Name (Last, First, Middle Initial)
C. James Hiken

Mailing Address 7109 Cove Pointe Pl

City Prospect State KY Zip Code 40059-9680

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

Name of Employer Diag. Imaging Alliance of Louisville Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **378.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 15 / 2009

Transaction ID : 32305260

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional).....▶	682.00
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 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Charles Holloway
 Full Name (Last, First, Middle Initial)
 Mailing Address 4855 County Road 49
 City Headland State AL Zip Code 36345-8483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Dothan Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 11 / 30 / 2009
Transaction ID : 32519416
 Amount of Each Receipt this Period 250.00

B. Brian Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 6632 Summer Darby Lane
 City Charlotte State NC Zip Code 28270-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282905
 Amount of Each Receipt this Period 374.00

C. John D. Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address Charlotte Radiology PO Box 36937
 City Charlotte State NC Zip Code 28236-6937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282906
 Amount of Each Receipt this Period 374.00

SUBTOTAL of Receipts This Page (optional)..... **998.00**
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 85
	<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 Radiology Association Political Action Committee

A. Jeffrey Hu
Full Name (Last, First, Middle Initial)

Mailing Address 302 Topwater Ln

City Greensboro State NC Zip Code 27455-3423

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

Name of Employer Greensboro Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475563

Amount of Each Receipt this Period
600.00

B. Rife Huckabee
Full Name (Last, First, Middle Initial)

Mailing Address 3720 Rabbit Creek Ct

City Theodore State AL Zip Code 36582-2505

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

Name of Employer Radiology Associates of Mobile Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475590

Amount of Each Receipt this Period
30.00

C. Jeffrey J Jaindl
Full Name (Last, First, Middle Initial)

Mailing Address 525 Sherwood Cir

City Spartanburg State SC Zip Code 29302-2719

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

Name of Employer Greenville Radiology, P.A. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32475574

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **190.00**

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 31 OF 85
	<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 Radiology Association Political Action Committee

A. James Jelinek
Full Name (Last, First, Middle Initial)

Mailing Address Washington Hospital Center
110 Irving St NW BA94

City Washington State DC Zip Code 20010-3017

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

Name of Employer Center Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
11 / 11 / 2009

Transaction ID : 32282928

Amount of Each Receipt this Period
45.00

B. Dennis Johnson
Full Name (Last, First, Middle Initial)

Mailing Address Eastern Radiologists Inc
2101 W Arlington Blvd Ste 210

City Greenville State NC Zip Code 27834-5758

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

Name of Employer Eastern Radiologists Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
11 / 20 / 2009

Transaction ID : 32454841

Amount of Each Receipt this Period
84.00

C. Dennis Johnson
Full Name (Last, First, Middle Initial)

Mailing Address Eastern Radiologists Inc
2101 W Arlington Blvd Ste 210

City Greenville State NC Zip Code 27834-5758

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

Name of Employer Eastern Radiologists Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
11 / 30 / 2009

Transaction ID : 32475577

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	169.00
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 32 OF 85
	<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 Radiology Association Political Action Committee

A. William Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 2839 Lombardy Ct

City Augusta State GA Zip Code 30909-3901

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2009

Transaction ID : 32305530

Amount of Each Receipt this Period
 500.00

B. Harold Jones Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 2806 Bellevue Ave

City Augusta State GA Zip Code 30909-3804

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2009

Transaction ID : 32305514

Amount of Each Receipt this Period
 500.00

C. Jeremy Jones
Full Name (Last, First, Middle Initial)

Mailing Address 5202 Locust Street

City Bellaire State TX Zip Code 77401-3323

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

Name of Employer Mount Sinai Medical Center Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2009

Transaction ID : 32282907

Amount of Each Receipt this Period
 374.00

SUBTOTAL of Receipts This Page (optional).....▶	1374.00
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 33 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Michael Kelley		Date of Receipt M M / D D / Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282908
Mailing Address 2500 Maynard Rd		Amount of Each Receipt this Period 374.00
City Charlotte	State NC	Zip Code 28270-0754
FEC ID number of contributing federal political committee. C		
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. William Ketcham II		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475600
Mailing Address PO Box 169		Amount of Each Receipt this Period 40.00
City Cheyenne	State WY	Zip Code 82003-0169
FEC ID number of contributing federal political committee. C		
Name of Employer Baylor College of Medicine	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. Scott Klioze		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305165
Mailing Address 7 Cypress Hollow Ln		Amount of Each Receipt this Period 100.00
City Ormond Beach	State FL	Zip Code 32174-3047
FEC ID number of contributing federal political committee. C		
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional).....▶	514.00
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 34 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Stephen Koller		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32302083
Mailing Address 1119 Basin Harbor Rd		Amount of Each Receipt this Period 100.00
City Bridport	State VT	Zip Code 05734-9570
FEC ID number of contributing federal political committee. C		
Name of Employer Middleburg Radiologists PLLC	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Neil Kramer		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305483
Mailing Address 1621 Fort Duquesne Dr		Amount of Each Receipt this Period 500.00
City Cherry Hill	State NJ	Zip Code 08003-2708
FEC ID number of contributing federal political committee. C		
Name of Employer South Jersey Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Shane Kraske		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32302084
Mailing Address 37 Columbine Ct		Amount of Each Receipt this Period 250.00
City Iowa City	State IA	Zip Code 52246-8716
FEC ID number of contributing federal political committee. C		
Name of Employer Radiologic Medical Services, Coralvill	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 35 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Peter Kravath
 Full Name (Last, First, Middle Initial)
 Mailing Address 2137 Dilworth Rd E
 City Charlotte State NC Zip Code 28203-5727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2009
Transaction ID : 32282909
 Amount of Each Receipt this Period
 374.00

B. Wendy Kriegel
 Full Name (Last, First, Middle Initial)
 Mailing Address 528 S Bonita Ave
 City Panama City State FL Zip Code 32401-3979
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bay Radiology Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32520175
 Amount of Each Receipt this Period
 100.00

C. Paul Lampert
 Full Name (Last, First, Middle Initial)
 Mailing Address 11595 E 26th St
 City Yuma State AZ Zip Code 85367-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MDIG Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2009
Transaction ID : 32305237
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	599.00
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 36 OF 85
	<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 Radiology Association Political Action Committee

A. Kent Lancaster
Full Name (Last, First, Middle Initial)
Mailing Address 3141 Sundance Path
City Stevensville State MI Zip Code 49127-9376
FEC ID number of contributing federal political committee. **C**
Name of Employer Radiology Associates of Berrie Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 15 / 2009
Transaction ID : 32305228
Amount of Each Receipt this Period 42.00

B. Fred Lassiter
Full Name (Last, First, Middle Initial)
Mailing Address Charlotte Radiology PO Box 36937
City Charlotte State NC Zip Code 28236-6937
FEC ID number of contributing federal political committee. **C**
Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282910
Amount of Each Receipt this Period 374.00

C. John Limbacher II
Full Name (Last, First, Middle Initial)
Mailing Address Putnam Radiology PC 315 N Washington Ave Ste 209
City Cookeville State TN Zip Code 38501-2660
FEC ID number of contributing federal political committee. **C**
Name of Employer Putnam Radiology, PC Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 30 / 2009
Transaction ID : 32475585
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 466.00
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 37 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lloyd Logue

Mailing Address 2233 W 33rd St

City Panama City State FL Zip Code 32405-1915

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

Name of Employer Bay Radiology Associates, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32520067

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)
B. Michael Longe

Mailing Address 305 River Wind Dr

City North Augusta State SC Zip Code 29841-6092

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 17 / 2009**

Transaction ID : 32305516

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial)
C. H. E. Longmaid III

Mailing Address 52 Harwich Rd

City Chestnut Hill State MA Zip Code 02467-3023

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

Name of Employer Deaconess Hospital Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **458.37**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475559

Amount of Each Receipt this Period **41.67**

SUBTOTAL of Receipts This Page (optional).....▶	641.67
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Eric Lund		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32519418
Mailing Address 211 Asphodel Dr		Amount of Each Receipt this Period 250.00
City Dothan	State AL Zip Code 36303-2984	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joseph Lurito		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 20 / 2009 Transaction ID : 32454848
Mailing Address Eastern Radiologists Inc 2101 W Arlington Blvd Ste 210		Amount of Each Receipt this Period 84.00
City Greenville	State NC Zip Code 27834-5758	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 234.00
Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey E Magnuson		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475582
Mailing Address 3493 Siems Ct		Amount of Each Receipt this Period 25.00
City Arden Hills	State MN Zip Code 55112-3639	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 275.00
Name of Employer St. Paul Radiology, P.A.	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	359.00
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 39 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Alfred Mansour Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475587
Mailing Address Central LA Imaging Inc 3704 North Blvd Ste A		Amount of Each Receipt this Period 83.34
City Alexandria	State LA	
Zip Code 71301-3658		Aggregate Year-to-Date ▼ 916.74
FEC ID number of contributing federal political committee. C		
Name of Employer Central LA Imaging Inc.	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Stuart Markowitz		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475571
Mailing Address Jefferson Radiology PC 85 Seymour St Ste 200		Amount of Each Receipt this Period 25.00
City Hartford	State CT	
Zip Code 06106-5509		Aggregate Year-to-Date ▼ 275.00
FEC ID number of contributing federal political committee. C		
Name of Employer Jefferson Radiology	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Terry Martin		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305226
Mailing Address Rad Assoc of Birmingham PC 2090 Columbiana Rd.		Amount of Each Receipt this Period 100.00
City Vestavia	State AL	
Zip Code 35216-2153		Aggregate Year-to-Date ▼ 1100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Rad Assoc of Birmingham PC	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	208.34
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 40 OF 85
	<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 Radiology Association Political Action Committee

A. Daniel McDonald
Full Name (Last, First, Middle Initial)

Mailing Address 8949 Shenendoah Cir

City Naples State FL Zip Code 34113-1662

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

Name of Employer Newton-Wellesley Hospital Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
11 / 30 / 2009
Transaction ID : 32475726

Amount of Each Receipt this Period
250.00

B. Barry McGinnis
Full Name (Last, First, Middle Initial)

Mailing Address Charlotte Radiology PA
PO Box 36937

City Charlotte State NC Zip Code 28236-6937

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

Name of Employer Charlotte Radiology PA Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
11 / 11 / 2009
Transaction ID : 32282911

Amount of Each Receipt this Period
374.00

C. Robert McKellar
Full Name (Last, First, Middle Initial)

Mailing Address 3 Reid Ct

City Augusta State GA Zip Code 30909-3099

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
11 / 17 / 2009
Transaction ID : 32305537

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶ 1124.00

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 41 OF 85
	<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 Radiology Association Political Action Committee

A. David Miller
Full Name (Last, First, Middle Initial)

Mailing Address 1307 White Horse Rd Ste A102

City Voorhees	State NJ	Zip Code 08043-2100
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FEC ID number of contributing federal political committee. **C**

Name of Employer South Jersey Radiology Associates	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	03	/	2009

Transaction ID : 32125921

Amount of Each Receipt this Period
500.00

B. Robert Mittl Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 4733 Coburn Court

City Charlotte	State NC	Zip Code 28277-2593
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FEC ID number of contributing federal political committee. **C**

Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	11	/	2009

Transaction ID : 32282912

Amount of Each Receipt this Period
374.00

C. Robert Mittl Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 4733 Coburn Court

City Charlotte	State NC	Zip Code 28277-2593
-------------------	-------------	------------------------

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

Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
920.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2009

Transaction ID : 32305259

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional).....▶	916.00
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 42 OF 85
	<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 Radiology Association Political Action Committee

A. Douglas Montgomery
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Glenwood Rd
 City West Hartford State CT Zip Code 06107-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jefferson Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **11 / 15 / 2009**
Transaction ID : 32305232
 Amount of Each Receipt this Period **25.00**

B. Demetrius Morros
 Full Name (Last, First, Middle Initial)
 Mailing Address 7418 Ridgecrest Court Rd
 City Vestavia Hls State AL Zip Code 35242-0525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Birmingham Radiological Group P.C. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **916.74**

Date of Receipt **11 / 15 / 2009**
Transaction ID : 32305236
 Amount of Each Receipt this Period **83.34**

C. Robert Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 913 Southview PI NE
 City Lenoir State NC Zip Code 28645-3755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lenoir Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **550.00**

Date of Receipt **11 / 15 / 2009**
Transaction ID : 32305219
 Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional).....▶	158.34
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 43 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Kevin O'Brien
 Full Name (Last, First, Middle Initial)
 Mailing Address St Johns Macomb Hospital
 11800 E 12 Mile Rd
 City Warren State MI Zip Code 48093-3472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diagnostic Radiology Consultants, PC Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2009
Transaction ID : 32305254
 Amount of Each Receipt this Period
400.00

B. James Oliver III
 Full Name (Last, First, Middle Initial)
 Mailing Address 4015 Winterberry Pl
 City Charlotte State NC Zip Code 28210-7329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology, P.A. Occupation Diagnostic Radiologist
 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
 11 / 11 / 2009
Transaction ID : 32282913
 Amount of Each Receipt this Period
374.00

C. Gilbert E Parker Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2763 Brownfield Way
 City Sumter State SC Zip Code 29150-2254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sumter Radiological, P.A. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2009
Transaction ID : 32305227
 Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....	434.00
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 44 OF 85
	<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 Radiology Association Political Action Committee

A. Douglas Picton
Full Name (Last, First, Middle Initial)

Mailing Address 1911 NC Highway 121

City Greenville	State NC	Zip Code 27834-7187
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FEC ID number of contributing federal political committee. **C**

Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **484.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2009

Transaction ID : 32454857

Amount of Each Receipt this Period

84.00

B. Douglas Picton
Full Name (Last, First, Middle Initial)

Mailing Address 1911 NC Highway 121

City Greenville	State NC	Zip Code 27834-7187
--------------------	-------------	------------------------

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

Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **484.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2009

Transaction ID : 32475597

Amount of Each Receipt this Period

40.00

C. Mary Pomeroy
Full Name (Last, First, Middle Initial)

Mailing Address 2625 Rolling Hills Dr

City Monroe	State NC	Zip Code 28110-8408
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FEC ID number of contributing federal political committee. **C**

Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **962.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2009

Transaction ID : 32282914

Amount of Each Receipt this Period

374.00

SUBTOTAL of Receipts This Page (optional).....▶	498.00
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 45 OF 85
	<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 Radiology Association Political Action Committee

A. Mary Pomeroy
Full Name (Last, First, Middle Initial)

Mailing Address 2625 Rolling Hills Dr

City Monroe State NC Zip Code 28110-8408

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **962.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475583

Amount of Each Receipt this Period **42.00**

B. Jeffrey Potter
Full Name (Last, First, Middle Initial)

Mailing Address 1803 Bloomsbury Rd

City Greenville State NC Zip Code 27858-9617

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

Name of Employer Eastern Radiologists Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt **11 / 20 / 2009**

Transaction ID : 32454858

Amount of Each Receipt this Period **84.00**

C. Jeffrey Potter
Full Name (Last, First, Middle Initial)

Mailing Address 1803 Bloomsbury Rd

City Greenville State NC Zip Code 27858-9617

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

Name of Employer Eastern Radiologists Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475565

Amount of Each Receipt this Period **40.00**

SUBTOTAL of Receipts This Page (optional).....▶	166.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 OF 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Stuart Prather Jr.		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305526
Mailing Address 2916 Stratford Dr		Amount of Each Receipt this Period 500.00
City Augusta	State GA	Zip Code 30909-3528
FEC ID number of contributing federal political committee. C	Name of Employer Brown and Associates	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Gregory Presser		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32520069
Mailing Address 706 Bunkers Cove Rd		Amount of Each Receipt this Period 100.00
City Panama City	State FL	Zip Code 32401-3920
FEC ID number of contributing federal political committee. C	Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. Robert Pyatt Jr.		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305494
Mailing Address 1391 Hearthside Dr		Amount of Each Receipt this Period 260.00
City Chambersburg	State PA	Zip Code 17202-3389
FEC ID number of contributing federal political committee. C	Name of Employer Chambersburg Imaging Associates	Occupation Diagnostic Radiologist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	860.00
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 47 OF 85
	<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 Radiology Association Political Action Committee

A. Scott Ramey
Full Name (Last, First, Middle Initial)

Mailing Address Bay Radiology Assoc PA
PO Box 1770

City Panama City State FL Zip Code 32402-1770

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

Name of Employer Bay Radiology Associates, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32520071

Amount of Each Receipt this Period **100.00**

B. Michael Raskin
Full Name (Last, First, Middle Initial)

Mailing Address 144 N Sewalls Point Rd

City Sewalls Point State FL Zip Code 34996-6502

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

Name of Employer Michael M. Raskin, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475460

Amount of Each Receipt this Period **250.00**

C. James Rawson
Full Name (Last, First, Middle Initial)

Mailing Address Medical College of Georgia
1120 15th St BA1414

City Augusta State GA Zip Code 30912-0004

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

Name of Employer Medical College of Georgia Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475578

Amount of Each Receipt this Period **83.34**

SUBTOTAL of Receipts This Page (optional)..... **433.34**

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 48 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard Redvanly			Date of Receipt M M / D D / Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282915		
Mailing Address 4315 Gosford Pl			Amount of Each Receipt this Period 374.00		
City Charlotte	State NC	Zip Code 28277-4546			
FEC ID number of contributing federal political committee. C					
Name of Employer Charlotte Radiology		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 940.00			

Full Name (Last, First, Middle Initial) B. Richard Redvanly			Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475573		
Mailing Address 4315 Gosford Pl			Amount of Each Receipt this Period 40.00		
City Charlotte	State NC	Zip Code 28277-4546			
FEC ID number of contributing federal political committee. C					
Name of Employer Charlotte Radiology		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 940.00			

Full Name (Last, First, Middle Initial) C. John Renz			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305247		
Mailing Address Mobile Infirmary Medical Ctr PO Box 370			Amount of Each Receipt this Period 50.00		
City Montrose	State AL	Zip Code 36559-0370			
FEC ID number of contributing federal political committee. C					
Name of Employer Mobile Infirmary Medical Center		Occupation Diagnostic Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

SUBTOTAL of Receipts This Page (optional).....▶	464.00
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 49 OF 85
	<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 Radiology Association Political Action Committee

A. Bradford Richmond
Full Name (Last, First, Middle Initial)

Mailing Address Cleveland Clinic Foundation
9500 Euclid Ave

City Cleveland State OH Zip Code 44195-0001

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

Name of Employer Cleveland Clinic Foundation Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 15 / 2009**

Transaction ID : 32305161

Amount of Each Receipt this Period **400.00**

B. John M Rogers
Full Name (Last, First, Middle Initial)

Mailing Address 802 West Gap Creek Road

City Greer State SC Zip Code 29651-5065

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

Name of Employer Greenville Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 15 / 2009**

Transaction ID : 32305162

Amount of Each Receipt this Period **42.00**

C. Steven Gregory Rogers
Full Name (Last, First, Middle Initial)

Mailing Address 926 River Oak Dr

City North Augusta State SC Zip Code 29841-3282

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

Name of Employer Brown and Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 17 / 2009**

Transaction ID : 32305524

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **582.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 OF 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 Radiology Association Political Action Committee

A. John Roth
Full Name (Last, First, Middle Initial)

Mailing Address 1693 Montane Drive East

City Golden State CO Zip Code 80401-8094

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

Name of Employer Diversified Radiology of CO., P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 18 / 2009
Transaction ID : 32365021

Amount of Each Receipt this Period 250.00

B. Philip J. Sabri
Full Name (Last, First, Middle Initial)

Mailing Address 727 Orchard Ct

City Chambersburg State PA Zip Code 17201-2864

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

Name of Employer Chambersburg Imaging Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 17 / 2009
Transaction ID : 32305497

Amount of Each Receipt this Period 260.00

C. Arthur Sandy
Full Name (Last, First, Middle Initial)

Mailing Address 2821 Argyle Rd

City Birmingham State AL Zip Code 35213-3403

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

Name of Employer Advanced Imaging Assoc of AL Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 30 / 2009
Transaction ID : 32475602

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional).....▶ 610.00

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 51 OF 85
	<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 Radiology Association Political Action Committee

A. Eric Sax
Full Name (Last, First, Middle Initial)

Mailing Address 9 Old Sudbury Rd

City Lincoln State MA Zip Code 01773-4807

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

Name of Employer The Imaging Institute Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **916.74**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475596

Amount of Each Receipt this Period **83.34**

B. Robert Schaaf
Full Name (Last, First, Middle Initial)

Mailing Address Wake Radiology
3949 Browning Pl

City Raleigh State NC Zip Code 27609-6536

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

Name of Employer Wake Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 05 / 2009**

Transaction ID : 32234018

Amount of Each Receipt this Period **500.00**

C. Leah Schafer
Full Name (Last, First, Middle Initial)

Mailing Address 101 Beacon Street Apt 7

City Boston State MA Zip Code 02116-1508

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

Name of Employer Newton Wellesley Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475723

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....	1083.34
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 52 OF 85
	<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 Radiology Association Political Action Committee

A. Andrew Schneider
Full Name (Last, First, Middle Initial)

Mailing Address Charlotte Radiology
3030 Latrobe Dr

City Charlotte State NC Zip Code 28211-4866

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

Name of Employer Charlotte Radiology, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 11 / 2009**

Transaction ID : 32282916

Amount of Each Receipt this Period **374.00**

B. Charles Schranck Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 75 Fairmount Dr

City Alton State IL Zip Code 62002-3201

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

Name of Employer Midwest Radiological Associates, P.C. Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475594

Amount of Each Receipt this Period **42.00**

C. Bruce Schroeder
Full Name (Last, First, Middle Initial)

Mailing Address 738 Lexington Dr

City Greenville State NC Zip Code 27834-0507

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

Name of Employer Eastern Radiologists Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **364.00**

Date of Receipt **11 / 20 / 2009**

Transaction ID : 32454863

Amount of Each Receipt this Period **84.00**

SUBTOTAL of Receipts This Page (optional).....	500.00
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 53 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Martin Schwartz

Mailing Address Radiology Associates of Birmingham
2090 Columbiana Rd Ste 4400

City Vestavia State AL Zip Code 35216-2152

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

Name of Employer Radiology Associates of Birmingham, PC Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475572

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)
B. Helaina Semmler

Mailing Address 1307 White Horse Rd Ste A102

City Voorhees State NJ Zip Code 08043-2100

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

Name of Employer South Jersey Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 17 / 2009**

Transaction ID : 32305484

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial)
C. Rajiv Sharma

Mailing Address 1228 Firethorne Club Drive

City Waxhaw State NC Zip Code 28173-6553

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 11 / 2009**

Transaction ID : 32282917

Amount of Each Receipt this Period **374.00**

SUBTOTAL of Receipts This Page (optional).....▶	974.00
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 54 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Dale Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 Sharon Rd
 City Charlotte State NC Zip Code 28211-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282918
 Amount of Each Receipt this Period 374.00

B. Michael Shivers
 Full Name (Last, First, Middle Initial)
 Mailing Address 1551 Falling Spring Rd
 City Chambersburg State PA Zip Code 17202-9096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chambersburg Imaging Assoc PC Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 17 / 2009
Transaction ID : 32305498
 Amount of Each Receipt this Period 260.00

C. Barry Shurman
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 Windsor Ave
 City Elkins Park State PA Zip Code 19027-3510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer South Jersey Radiology Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 17 / 2009
Transaction ID : 32305485
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional).....	1134.00
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 55 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Lonnie Simmons		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 18 / 2009 Transaction ID : 32364544
Mailing Address Gundersen/Lutheran Med Ctr 1900 South Ave C02-002		Amount of Each Receipt this Period 83.34
City La Crosse	State WI	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 916.74
Name of Employer Gundersen Lutheran Clinic	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Roy Siragusa		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475462
Mailing Address 28 Winding Creek Way		Amount of Each Receipt this Period 250.00
City Ormond Beach	State FL	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James Sloves		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32302082
Mailing Address 4870 W Pinewild Rd		Amount of Each Receipt this Period 250.00
City Reno	State NV	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Holy Cross Hospital	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	583.34
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 57 OF 85
	<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 Radiology Association Political Action Committee

A. Joseph Staab
Full Name (Last, First, Middle Initial)

Mailing Address 160 Pitch Pine Ln

City Pinehurst State NC Zip Code 28374-9217

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

Name of Employer Self-Employed Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282919

Amount of Each Receipt this Period 374.00

B. Walter Steele
Full Name (Last, First, Middle Initial)

Mailing Address 2115 Foxcroft Woods Ln

City Charlotte State NC Zip Code 28211-2666

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 596.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282920

Amount of Each Receipt this Period 446.00

C. Jeffrey Stein
Full Name (Last, First, Middle Initial)

Mailing Address 7047 Whitmarsh Ct

City Charlotte State NC Zip Code 28210-4901

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2009
Transaction ID : 32282921

Amount of Each Receipt this Period 374.00

SUBTOTAL of Receipts This Page (optional).....▶	1194.00
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 58 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Janet Storella		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282927
Mailing Address 6515 Fallwind Ln		Amount of Each Receipt this Period 40.00
City Bethesda	State MD	
Zip Code 20817-4941		Amount of Each Receipt this Period 920.00
FEC ID number of contributing federal political committee. C	Occupation Diagnostic Radiologist	
Name of Employer Drs Grover, Christie & Merritt	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 920.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Janet Storella		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2009 Transaction ID : 32468310
Mailing Address 6515 Fallwind Ln		Amount of Each Receipt this Period 40.00
City Bethesda	State MD	
Zip Code 20817-4941		Amount of Each Receipt this Period 920.00
FEC ID number of contributing federal political committee. C	Occupation Diagnostic Radiologist	
Name of Employer Drs Grover, Christie & Merritt	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 920.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Brett Storm		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32519838
Mailing Address 1900 Fairview Ave		Amount of Each Receipt this Period 250.00
City Dothan	State AL	
Zip Code 36301-3008		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Occupation Diagnostic Radiologist	
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	330.00
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 59 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. James Strohmenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 2818 Canal Dr
 City Panama City State FL Zip Code 32405-1610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bay Radiology Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1100.00**

Date of Receipt **11 / 30 / 2009**
Transaction ID : 32520073
 Amount of Each Receipt this Period **100.00**

B. Jeffrey Sue
 Full Name (Last, First, Middle Initial)
 Mailing Address 956 Kaahue St
 City Honolulu State HI Zip Code 96825-1341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yeoh & Muranaka, MD, Inc. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **11 / 05 / 2009**
Transaction ID : 32234119
 Amount of Each Receipt this Period **1000.00**

C. Niteen Sukerkar
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 Dewberry Ct
 City Chambersburg State PA Zip Code 17201-2870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chambersburg Imaging Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **11 / 17 / 2009**
Transaction ID : 32305499
 Amount of Each Receipt this Period **260.00**

SUBTOTAL of Receipts This Page (optional).....	1360.00
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 60 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Edward Sullivan III		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475567
Mailing Address Radiology Assoc of Birmingham 2090 Columbiana Rd Ste 4400		Amount of Each Receipt this Period 400.00
City Vestavia	State AL Zip Code 35216-2152	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 440.00
Name of Employer Radiology Associates of Birmingham	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ricardo Syklawer		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32519420
Mailing Address 101 Royal Highlands Ln		Amount of Each Receipt this Period 250.00
City Dothan	State AL Zip Code 36305-9345	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Radiology Associates of Dothan	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thane Toe Thane		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305500
Mailing Address 946 Dewberry Ct		Amount of Each Receipt this Period 260.00
City Chambersburg	State PA Zip Code 17201-2870	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 260.00
Name of Employer Chambersburg Imaging Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 61 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Roger Thomas		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305224
Mailing Address 1636 Anita Ln		Amount of Each Receipt this Period 40.00
City Newport Beach	State Zip Code CA 92660-4804	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 460.00
Name of Employer Newport Harbor Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Eric Tocci		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305163
Mailing Address 437 Triton Road		Amount of Each Receipt this Period 50.00
City Ormond Beach	State Zip Code FL 32176-5459	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Raymond Tu		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32302179
Mailing Address 1539 27th St NW		Amount of Each Receipt this Period 250.00
City Washington	State Zip Code DC 20007-3030	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 750.00
Name of Employer Progressive Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 62 OF 85
	<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 Radiology Association Political Action Committee

A. Michael Tuite
 Full Name (Last, First, Middle Initial)
 Mailing Address 7699 Leta Way
 City Verona State WI Zip Code 53593-8631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Wisconsin Hospital Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2009
Transaction ID : 32234017
 Amount of Each Receipt this Period
500.00

B. Sibley Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Fairview Ave
 City Dothan State AL Zip Code 36301-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Dothan, PC Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009
Transaction ID : 32519841
 Amount of Each Receipt this Period
250.00

C. Christopher Ullrich
 Full Name (Last, First, Middle Initial)
 Mailing Address 2623 Lemon Tree Ln
 City Charlotte State NC Zip Code 28211-3643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charlotte Radiology PA Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2009
Transaction ID : 32282922
 Amount of Each Receipt this Period
374.00

SUBTOTAL of Receipts This Page (optional).....▶	1124.00
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 63 OF 85
	<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 Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. George Veale

Mailing Address 1900 Fairview Ave

City Dothan State AL Zip Code 36301-3008

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

Name of Employer Radiology Associates of Dothan, P.C. Occupation Diagnostic Radiologist

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
11 / 30 / 2009

Transaction ID : 32519842

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Roger Vithalani

Mailing Address 516 Chesapeake Place

City Greenville State NC Zip Code 27858-0678

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

Name of Employer Eastern Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2009

Transaction ID : 32454870

Amount of Each Receipt this Period
84.00

Full Name (Last, First, Middle Initial)
C. Roger Vithalani

Mailing Address 516 Chesapeake Place

City Greenville State NC Zip Code 27858-0678

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

Name of Employer Eastern Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2009

Transaction ID : 32475589

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **374.00**

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 64 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Forrest Walker		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2009 Transaction ID : 32305515
Mailing Address 918 Johns Rd		Amount of Each Receipt this Period 500.00
City Augusta	State GA	Zip Code 30904-6102
FEC ID number of contributing federal political committee. C		
Name of Employer Brown and Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Terry Wallace		Date of Receipt M M / D D / Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282923
Mailing Address Charlotte Radiology PO Box 36937		Amount of Each Receipt this Period 266.00
City Charlotte	State NC	Zip Code 28236-6937
FEC ID number of contributing federal political committee. C		
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.00	

Full Name (Last, First, Middle Initial) C. Bill H Warren		Date of Receipt M M / D D / Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475463
Mailing Address UWMC Box 357115		Amount of Each Receipt this Period 250.00
City Seattle	State WA	Zip Code 98195-0001
FEC ID number of contributing federal political committee. C		
Name of Employer University of Washington	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1016.00
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 65 OF 85
	<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 Radiology Association Political Action Committee

A. William Way Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7713 Oakmont Pl

City Raleigh State NC Zip Code 27615-5492

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

Name of Employer Wake Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 30 / 2009**

Transaction ID : 32475588

Amount of Each Receipt this Period **400.00**

B. Larry Wells
Full Name (Last, First, Middle Initial)

Mailing Address 3718 Sapphire Dr

City Martinez State GA Zip Code 30907-9572

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

Name of Employer Brown Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 17 / 2009**

Transaction ID : 32305532

Amount of Each Receipt this Period **500.00**

C. William Carey Werthmuller
Full Name (Last, First, Middle Initial)

Mailing Address Charlotte Radiology PO Box 36937

City Charlotte State NC Zip Code 28236-6937

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

Name of Employer Charlotte Radiology Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **11 / 11 / 2009**

Transaction ID : 32282924

Amount of Each Receipt this Period **374.00**

SUBTOTAL of Receipts This Page (optional)..... **914.00**

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 66 OF 85
	<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 Radiology Association Political Action Committee

A. Steven Westgate
Full Name (Last, First, Middle Initial)

Mailing Address Ellis Fischel Cancer Center
115 Business Loop 70 W

City Columbia State MO Zip Code 65203-3244

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

Name of Employer Self-Employed
Occupation Radiation Oncologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2009

Transaction ID : 32234127

Amount of Each Receipt this Period
500.00

B. Harold White
Full Name (Last, First, Middle Initial)

Mailing Address 2477 Sourek Rd

City Akron State OH Zip Code 44333-2928

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

Name of Employer Radiology & Imaging Services, Inc.
Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2009

Transaction ID : 32305512

Amount of Each Receipt this Period
500.00

C. Charles Williams III
Full Name (Last, First, Middle Initial)

Mailing Address 2117 Cleveland Street Ext

City Greenville State SC Zip Code 29607-3649

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

Name of Employer Greenville Radiology, PA
Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 15 / 2009

Transaction ID : 32305164

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 67 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Randall S. Winn		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305160
Mailing Address Reading Hospital & Med Ctr PO Box 16052		Amount of Each Receipt this Period 250.00
City Reading	State PA	
Zip Code 19612-6052		Aggregate Year-to-Date ▼ 750.00
FEC ID number of contributing federal political committee. C		
Name of Employer West Reading Radiology Assoc	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Joel Wissing		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282925
Mailing Address Charlotte Radiology PO Box 36937		Amount of Each Receipt this Period 374.00
City Charlotte	State NC	
Zip Code 28236-6937		Aggregate Year-to-Date ▼ 740.00
FEC ID number of contributing federal political committee. C		
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mark Wittry		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475584
Mailing Address 10525 Concord School Rd		Amount of Each Receipt this Period 85.00
City Saint Louis	State MO	
Zip Code 63128-1232		Aggregate Year-to-Date ▼ 1680.00
FEC ID number of contributing federal political committee. C		
Name of Employer West County Radiological Group, Inc.	Occupation Cardiac Radiologist	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	709.00
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 68 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Andrew Wu		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2009 Transaction ID : 32305225
Mailing Address 8729 Valentine Ct		Amount of Each Receipt this Period 40.00
City Raleigh	State NC	Zip Code 27615-5830
FEC ID number of contributing federal political committee. C		
Name of Employer Wake Radiology	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. Leonard Zawodniak		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2009 Transaction ID : 32475561
Mailing Address 1439 Garrett Dr		Amount of Each Receipt this Period 40.00
City Wall Township	State NJ	Zip Code 07719-9648
FEC ID number of contributing federal political committee. C		
Name of Employer Jersey Shore Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. James Zuger		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 11 / 2009 Transaction ID : 32282926
Mailing Address 6011 Bentway Dr		Amount of Each Receipt this Period 374.00
City Charlotte	State NC	Zip Code 28226-8052
FEC ID number of contributing federal political committee. C		
Name of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	454.00
TOTAL This Period (last page this line number only).....▶	43586.64

**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 69 OF 85
<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 type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

A. Vanguard Money Market

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 13750

City Philadelphia State PA Zip Code 19101-9897

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
762.70

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2009

Transaction ID : 32682653

Amount of Each Receipt this Period
14.75

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	14.75
TOTAL This Period (last page this line number only).....▶	14.75

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of America - Hard

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 28261-7025

Purpose of Disbursement
290

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 32682654

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. America's Leadership PAC

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
204

011

Candidate Name

America's Leadership PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2009

Transaction ID : 32124539

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Bill Cassidy for Congress

Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898-0505

Purpose of Disbursement
201

011

Candidate Name

William Cassidy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) Contribution

State: LA District: 06

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2009

Transaction ID : 32124701

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Bill Cassidy for Congress

Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898-0505

Purpose of Disbursement
201

011

Candidate Name

William Cassidy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) Contribution

State: LA District: 06

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2009

Transaction ID : 32337692

Amount of Each Disbursement this Period

1000.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bill Owens for Congress

Mailing Address PO Box 1575

City State Zip Code
Plattsburgh NY 12901

Purpose of Disbursement
201

011

Candidate Name

William L. Owens

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2009			

Transaction ID : 32111204

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Carper for Senate

Mailing Address PO Box 2882

City State Zip Code
Wilmington DE 19805

Purpose of Disbursement
201

011

Candidate Name

Thomas Richard Carper

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2009			

Transaction ID : 32338016

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Castle Campaign Fund

Mailing Address PO Box 133

City State Zip Code
Wilmington DE 19899

Purpose of Disbursement
201

011

Candidate Name

Michael N. Castle

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2009			

Transaction ID : 32111404

Amount of Each Disbursement this Period

5000.00

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

8500.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cathy McMorris Rodgers for Congress

Mailing Address Box 137

City Spokane State WA Zip Code 99210-0137

Purpose of Disbursement 201

011

Candidate Name

Cathy McMorris Rodgers

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: WA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2009			

Transaction ID : 32111206

Amount of Each Disbursement this Period

1500.00

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 201

011

Candidate Name

Cathy McMorris Rodgers

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: WA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2009			

Transaction ID : 32338012

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Charles A. Gonzalez Congressional Campaign

Mailing Address PO Box 12612

City San Antonio State TX Zip Code 78212

Purpose of Disbursement 201

011

Candidate Name

Charles A. Gonzalez

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: TX District: 20

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2009			

Transaction ID : 32124540

Amount of Each Disbursement this Period

2000.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cmr Political Action Committee

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement 204

011

Candidate Name

Cmr Political Action Committee

Category/Type

Office Sought: House Senate President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2009

Transaction ID : 32456534

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Congressman Waxman Campaign Committee

Mailing Address 6380 Wilshire Blvd., #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement 201

011

Candidate Name

Henry A. Waxman

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 33

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2009

Transaction ID : 32111420

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Coulson for Congress

Mailing Address PO Box 2354

City Glenview State IL Zip Code 60025

Purpose of Disbursement 201

011

Candidate Name

Elizabeth Coulson

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2009

Transaction ID : 32287548

Amount of Each Disbursement this Period

5000.00

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

12500.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dan Inouye for Us Senate

Mailing Address 1088 Bishop Street Suite 1009

City Honolulu State HI Zip Code 96813

Purpose of Disbursement
201

011

Candidate Name

Daniel K. Inouye

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2009

Transaction ID : 32263276

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Fleming for Congress

Mailing Address PO Box 1236

City Minden State LA Zip Code 71058-1236

Purpose of Disbursement
201

011

Candidate Name

John Calvin Fleming Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: LA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2009

Transaction ID : 32456404

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Freedom Project; the

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement
204

011

Candidate Name

Freedom Project; the

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District: Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2009

Transaction ID : 32337044

Amount of Each Disbursement this Period

3000.00

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

7000.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Carolyn McCarthy

Mailing Address 151 Linden Road

City Mineola State NY Zip Code 11501

Purpose of Disbursement 201

011

Candidate Name

Carolyn McCarthy

Category/Type

Office Sought: House Senate President
State: NY District: 04

Disbursement For: 2010
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2009

Transaction ID : 32337154

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dan Maffei

Mailing Address PO Box 230

City Syracuse State NY Zip Code 13201

Purpose of Disbursement 201

011

Candidate Name

Daniel Benjamin Maffei

Category/Type

Office Sought: House Senate President
State: NY District: 24

Disbursement For: 2010
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 18 / 2009

Transaction ID : 32290965

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends of Ginny Brown-Waite

Mailing Address PO Box 865

City Brooksville State FL Zip Code 34605

Purpose of Disbursement 201

011

Candidate Name

Friends of Ginny Brown-Waite

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2009
 Primary General Other (specify) ▼
Contribution

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2009

Transaction ID : 32337137

Amount of Each Disbursement this Period

2500.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Jim Clyburn

Mailing Address PO Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement
201

011

Candidate Name

James E. Clyburn

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	0	9

Transaction ID : 32456274

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends of Sherrod Brown

Mailing Address PO Box 76187

City Washington State DC Zip Code 20013

Purpose of Disbursement
201

011

Candidate Name

Sherrod Brown

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	0	9

Transaction ID : 32124544

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Hoosiers for Hill

Mailing Address PO Box 1071

City Seymour State IN Zip Code 47274

Purpose of Disbursement
201

011

Candidate Name

Baron P. Hill

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IN District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	0	9

Transaction ID : 32111433

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

9	5	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

9	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoosiers Supporting Buyer for Congress

Mailing Address 103 West Broadway St, PO Box 712

City Monticello State IN Zip Code 47960

Purpose of Disbursement 201

011

Candidate Name

Stephen E. Buyer

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: IN District: 04

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2009

Transaction ID : 32111438

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Kay Granger Campaign Fund

Mailing Address 715 Jones Street, Suite 101

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement 201

011

Candidate Name

Kay Granger

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: TX District: 12

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2009

Transaction ID : 32813764

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Kurt Schrader for Congress

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement 201

011

Candidate Name

Kurt Schrader

Category/Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: OR District: 05

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2009

Transaction ID : 32111426

Amount of Each Disbursement this Period

2000.00

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

6500.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Linder for Congress

Mailing Address 4251 Byhalia Road

City State Zip Code
Hernando MS 38632

Purpose of Disbursement
201

011

Candidate Name
John Linder

Category/
Type

Office Sought: House
 Senate
 President
State: GA District: 07

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2009			

Transaction ID : 32337231

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Majority Committee PAC--Mc PAC

Mailing Address PO Box 10134

City State Zip Code
Bakersfield CA 93389

Purpose of Disbursement
204

011

Candidate Name
Majority Committee PAC--Mc PAC

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2009			

Transaction ID : 32339318

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Majority Committee PAC--Mc PAC

Mailing Address PO Box 10134

City State Zip Code
Bakersfield CA 93389

Purpose of Disbursement
204

011

Candidate Name
Majority Committee PAC--Mc PAC

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2009			

Transaction ID : 32340994

Amount of Each Disbursement this Period

2500.00

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

6000.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mikulski for Senate Committee

Mailing Address PO Box 13147

City Baltimore State MD Zip Code 21203

Purpose of Disbursement
201

011

Candidate Name

Barbara A. Mikulski

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	0	9

Transaction ID : 32336953

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Republican Mainstreet Partnership PAC

Mailing Address C/O G & W 2201 Wisconsin Ave., NW
Suite 320

City Washington State DC Zip Code 20007

Purpose of Disbursement
204

011

Candidate Name

Republican Mainstreet Partnership PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	0	9

Transaction ID : 32456498

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee; the

Mailing Address Post Office Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement
201

011

Candidate Name

Richard M. Burr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	0	9

Transaction ID : 32111405

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

1	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rogers for Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116-0581

Purpose of Disbursement
201

011

Candidate Name

Mike Rogers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2009

Transaction ID : 32111439

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Rogers for Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116-0581

Purpose of Disbursement
201

011

Candidate Name

Mike Rogers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2009

Transaction ID : 32124549

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Rogers for Congress

Mailing Address PO Box 581

City Brighton State MI Zip Code 48116-0581

Purpose of Disbursement
201

011

Candidate Name

Mike Rogers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2009

Transaction ID : 32813429

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Schock for Congress

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement
201

011

Candidate Name

Aaron Schock

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	0	9

Transaction ID : 32111441

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Scott Murphy for Congress

Mailing Address PO Box 15320

City Washington State DC Zip Code 20003

Purpose of Disbursement
201

011

Candidate Name

Scott Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 20

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	0	9

Transaction ID : 32111440

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Souder for Congress, Inc.

Mailing Address PO Box 40233

City Fort Wayne State IN Zip Code 46804

Purpose of Disbursement
201

011

Candidate Name

Mark E. Souder

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	9

Transaction ID : 32287547

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

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

5	0	0	0	.	0	0
---	---	---	---	---	---	---

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

5	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sue Myrick for Congress

Mailing Address PO Box 37091

City Charlotte State NC Zip Code 28237

Purpose of Disbursement 201

011

Candidate Name

Sue Wilkins Myrick

Category/Type

Office Sought: House Senate President
State: NC District: 09

Disbursement For: 2010
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2009

Transaction ID : 32337303

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Taking the Hill PAC

Mailing Address 1732 Spruce St Apt 4F

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement 204

011

Candidate Name

Taking the Hill PAC

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2009
 Primary General Other (specify) ▼
Contribution

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2009

Transaction ID : 32111423

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Taking the Hill PAC

Mailing Address 1732 Spruce St Apt 4F

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement 204

011

Candidate Name

Taking the Hill PAC

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2009
 Primary General Other (specify) ▼
Contribution

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2009

Transaction ID : 32456607

Amount of Each Disbursement this Period

3000.00

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

6000.00

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

