

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

ADDRESS (number and street) 1111 North Fairfax St. Alexandria VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00012880 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 09 01 2012 through 09 30 2012

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

Type or Print Name of Treasurer Mr Justin Moore

Signature of Treasurer Mr Justin Moore [Electronically Filed] Date 10 19 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

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="2012"/>		549825.80
(b) Cash on Hand at Beginning of Reporting Period.....	477785.89	
(c) Total Receipts (from Line 19)	43450.48	470522.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	521236.37	1020347.89
7. Total Disbursements (from Line 31).....	201498.00	700609.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	319738.37	319738.37
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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

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).....	23002.65	216795.25
(ii) Unitemized	20393.40	250691.48
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	43396.05	467486.73
(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)	43396.05	467486.73
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	54.43	535.36
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))..... ▶	43450.48	470522.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	43450.48	470522.09

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	190500.00	685250.00
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	525.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	525.00
29. Other Disbursements	10998.00	14834.52
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)) ..	201498.00	700609.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	201498.00	700609.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	43396.05	467486.73
34. Total Contribution Refunds (from Line 28(d))	0.00	525.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43396.05	466961.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Ms Suzanne Rinere O'Brien
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 Thurlow Ave
 City Rochester State NY Zip Code 14609-5907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Rochester Medical Center Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 06 / 2012
Transaction ID : 47365213
 Amount of Each Receipt this Period 100.00

B. Mr William Gutierrez
 Full Name (Last, First, Middle Initial)
 Mailing Address 724 Sevilla Ave
 City Coral Gables State FL Zip Code 33134-5628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2012
Transaction ID : 47369648
 Amount of Each Receipt this Period 250.00

C. Jennie Kane Gregory
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 Abercorn Pl
 City Sherwood State AR Zip Code 72120-6502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Vincent Health Systems Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2012
Transaction ID : 47369686
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. William Philip Hopfinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Kenrick Plz
 City Saint Louis State MO Zip Code 63119-4414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Louis Home Health Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2012
Transaction ID : 47369702
 Amount of Each Receipt this Period 250.00

B. Steven V Sopher
 Full Name (Last, First, Middle Initial)
 Mailing Address 283 Lockhaven Dr Ste 315
 City Houston State TX Zip Code 77073-5519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ergo Rehab Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 04 / 2012
Transaction ID : 47369703
 Amount of Each Receipt this Period 1000.00

C. Diane Beaudoin
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Heselton St
 City Skowhegan State ME Zip Code 04976-2312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2012
Transaction ID : 47369710
 Amount of Each Receipt this Period 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Dr Margaret Nonnemacher
 Full Name (Last, First, Middle Initial)
 Mailing Address 2446 Nw 35th Ter
 City Gainesville State FL Zip Code 32605-2632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of St. Augustine for Health Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 47369713
 Amount of Each Receipt this Period
 500.00

B. Mary E. English
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Ocean Ave
 City Northport State NY Zip Code 11768-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northport Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 47369715
 Amount of Each Receipt this Period
 500.00

C. Mr Michael Joseph Horsfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 27220 205th Ave
 City Eldridge State IA Zip Code 52748-9474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rock Valley Physical Therapy Occupation PT
 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
 09 / 04 / 2012
Transaction ID : 47369933
 Amount of Each Receipt this Period
 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Connie B Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 6
 City Chelan State WA Zip Code 98816-0006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chelan Physical Therapy Occupation PT
 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
 09 / 04 / 2012
Transaction ID : 47369934
 Amount of Each Receipt this Period
50.00

B. Khalid Mirza
 Full Name (Last, First, Middle Initial)
 Mailing Address 7600 Sw 8th St
 City Miami State FL Zip Code 33144-4462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Palmetto SubAcute Care Ctr Occupation PT
 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
 09 / 04 / 2012
Transaction ID : 47610238
 Amount of Each Receipt this Period
250.00

C. Brett Alan Tice
 Full Name (Last, First, Middle Initial)
 Mailing Address 15171 Kelly Dr
 City Harlingen State TX Zip Code 78552-6738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Back to Action Occupation PT
 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
 09 / 04 / 2012
Transaction ID : 47610241
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. John D. Barnes		Date of Receipt MM / DD / YYYY 09 / 05 / 2012 Transaction ID : 47610257
Mailing Address 1005 Hardee Place		Amount of Each Receipt this Period 41.67
City Alexandria	State VA	Zip Code 22304-1719
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer American Physical Therapy Association	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 706.72	

Full Name (Last, First, Middle Initial) B. Mr Matthew Wayne Elrod		Date of Receipt MM / DD / YYYY 09 / 05 / 2012 Transaction ID : 47610271
Mailing Address 4782 Farndon Ct		Amount of Each Receipt this Period 20.84
City Fairfax	State VA	Zip Code 22032-1913
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.84
Name of Employer APTA	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.44	

Full Name (Last, First, Middle Initial) C. Mandy Frohlich		Date of Receipt MM / DD / YYYY 09 / 05 / 2012 Transaction ID : 47610275
Mailing Address 1363 Emerald Street, NE		Amount of Each Receipt this Period 20.84
City Washington	State DC	Zip Code 20002-5431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.84
Name of Employer APTA	Occupation Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.44	

SUBTOTAL of Receipts This Page (optional).....▶	83.35
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mary Jane Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 6500 Langleigh Way
 City Alexandria State VA Zip Code 22315-3454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 711.72

Date of Receipt 09 / 05 / 2012
Transaction ID : 47610279
 Amount of Each Receipt this Period 41.67

B. Karen Jost
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Madison St Apt 805
 City Alexandria State VA Zip Code 22314-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 712.00

Date of Receipt 09 / 05 / 2012
Transaction ID : 47610298
 Amount of Each Receipt this Period 42.00

C. Michael Matlack
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 19th Street South
 City Arlington State VA Zip Code 22204-5114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.44

Date of Receipt 09 / 05 / 2012
Transaction ID : 47610373
 Amount of Each Receipt this Period 20.84

SUBTOTAL of Receipts This Page (optional).....▶	104.51
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. Justin D Moore		Date of Receipt
Mailing Address 4819 1st St S		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Arlington	VA	22204-1315
FEC ID number of contributing federal political committee.		Transaction ID : 47610531
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.67"/>
Name of Employer	Occupation	
APTA	PT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="705.19"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Heather Lauren Smith		Date of Receipt
Mailing Address 2200 12th Ct N Apt 507		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Arlington	VA	22201-6512
FEC ID number of contributing federal political committee.		Transaction ID : 47610940
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.84"/>
Name of Employer	Occupation	
APTA	PT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="354.44"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Brandon Michael Dederich		Date of Receipt
Mailing Address 2432 Crestview Dr		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Newport Beach	CA	92663-5623
FEC ID number of contributing federal political committee.		Transaction ID : 47614571
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Xcelerate Physical Therapy	PT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Dennis J. Dougherty

Mailing Address 1601 Stonehill Way

City Bethlehem State PA Zip Code 18015-8964

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

Name of Employer: Rehab Partners Occupation: PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **09 / 06 / 2012**

Transaction ID : 47614572

Amount of Each Receipt this Period: **50.00**

Full Name (Last, First, Middle Initial)
B. Judith Dougherty

Mailing Address 1601 Stonehill Way

City Bethlehem State PA Zip Code 18015-8964

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

Name of Employer: Physical Therapy at St. Luke's Occupation: PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **09 / 06 / 2012**

Transaction ID : 47614573

Amount of Each Receipt this Period: **50.00**

Full Name (Last, First, Middle Initial)
C. Ms Beth Whitehead

Mailing Address PO Box 37 1711 Coolee Ave

City Jackson State AL Zip Code 36545-0037

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

Name of Employer: Health Actions Occupation: PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt: **09 / 06 / 2012**

Transaction ID : 47614575

Amount of Each Receipt this Period: **250.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Dr Robert H. Clark
Full Name (Last, First, Middle Initial)

Mailing Address 68 Mile Hill Rd S

City Newtown State CT Zip Code 06470-2360

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012

Transaction ID : 47614580

Amount of Each Receipt this Period
125.00

B. Brett Alan Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 1000 E Riverview Expy Ste 140

City Wisconsin Rapids State WI Zip Code 54494-5471

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

Name of Employer Roberts Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **835.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012

Transaction ID : 47614581

Amount of Each Receipt this Period
100.00

C. Ms Jane S. Baldwin
Full Name (Last, First, Middle Initial)

Mailing Address 12 9th St Apt 603

City Medford State MA Zip Code 02155-5165

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

Name of Employer Health Partners Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012

Transaction ID : 47614582

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 15 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Kimberly J. Marlatt

Mailing Address 7070 130th Trl.

City State Zip Code
Gordon NE 69343-5416

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

Name of Employer Occupation
Physical Therapy West PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 06 / 2012
Transaction ID : 47614583

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Sandra M. Riegor

Mailing Address 230 W Seaview Dr

City State Zip Code
Duck Key FL 33050-3828

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

Name of Employer Occupation
Self-Employed PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
09 / 06 / 2012
Transaction ID : 47614588

Amount of Each Receipt this Period
125.00

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

Mailing Address 129 Rancho Corralitos Rd

City State Zip Code
Corralitos CA 95076-1139

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

Name of Employer Occupation
Good Samaritan Hospital PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 06 / 2012
Transaction ID : 47614590

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Deborah Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 1020 11th Street
 Suite C
 City State Zip Code
 Tell City IN 47586-2130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Advanced Rehab Incorporated PT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012
Transaction ID : 47614591
 Amount of Each Receipt this Period
 250.00

B. Joanne Jonathan
 Full Name (Last, First, Middle Initial)
 Mailing Address 15612 Count Viking Ct
 City State Zip Code
 Westfield IN 46074-7632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Advance PT PT
 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
 09 / 06 / 2012
Transaction ID : 47615037
 Amount of Each Receipt this Period
 250.00

C. Ms Victoria S T Tilley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Bartlett Cir
 City State Zip Code
 Hillsborough NC 27278-6772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed PT
 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
 09 / 13 / 2012
Transaction ID : 47622012
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 17 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Dr Gretchen A. Seif

Mailing Address 1970 Pierce St

City State Zip Code
Daniel Island SC 29492-7988

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

Name of Employer Occupation
MUSC PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012
Transaction ID : 47622014

Amount of Each Receipt this Period
50.00

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

Mailing Address 32113 Bexley Cir

City State Zip Code
Avon Lake OH 44012-2134

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

Name of Employer Occupation
JPT Rehab PT

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
09 / 13 / 2012
Transaction ID : 47649573

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ann Giffin

Mailing Address 8949 Wesley Place

City State Zip Code
Knoxville TN 37922-5916

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

Name of Employer Occupation
University of Tennessee PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2012
Transaction ID : 47649582

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Robert Sellin
Full Name (Last, First, Middle Initial)

Mailing Address 397 Hays Blvd

City Lexington State KY Zip Code 40509-4495

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

Name of Employer Electrophysiologic Testing Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2012

Transaction ID : 47649596

Amount of Each Receipt this Period
 500.00

B. Pauline Flesch
Full Name (Last, First, Middle Initial)

Mailing Address 9684 Cedar Point Dr

City Carmel State IN Zip Code 46032-9574

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

Name of Employer IU Health Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2012

Transaction ID : 47649599

Amount of Each Receipt this Period
 250.00

C. Shirley A. Sahrman
Full Name (Last, First, Middle Initial)

Mailing Address 1139 Ralph Ter

City Richmond Heights State MO Zip Code 63117-1528

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

Name of Employer Washington University Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2012

Transaction ID : 47649601

Amount of Each Receipt this Period
 250.00

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 19 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Dr Sharon L. Dunn
Full Name (Last, First, Middle Initial)

Mailing Address 5730 Marina Bay Dr

City Shreveport State LA Zip Code 71119-3918

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

Name of Employer LSUHSC-Shreveport Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47649602

Amount of Each Receipt this Period 100.00

B. Mr Robert C. Runge Jr
Full Name (Last, First, Middle Initial)

Mailing Address 3379 Voyager Dr

City Neenah State WI Zip Code 54956-9027

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

Name of Employer Excel Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2012
Transaction ID : 47649643

Amount of Each Receipt this Period 250.00

C. Brian Lee White
Full Name (Last, First, Middle Initial)

Mailing Address 6180 S Tarrega Ln

City Meridian State ID Zip Code 83642-7201

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

Name of Employer Mountain Land Rehabilitation Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2012
Transaction ID : 47649655

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 20 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Blaine Daniel Stimac
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 E Bowman Dr
 City Kalispell State MT Zip Code 59901-6878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kalispell Rehab Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47649658
 Amount of Each Receipt this Period 500.00

B. Andrea L. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Sonoma Creek Trl
 City Harvest State AL Zip Code 35749-5813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nesin Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47649684
 Amount of Each Receipt this Period 25.00

C. Dr Ann A. Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 7415 Fernbrook Ln N
 City Maple Grove State MN Zip Code 55311-2700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47649693
 Amount of Each Receipt this Period 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. Kathleen K. Mairella		Date of Receipt 09 / 13 / 2012 Transaction ID : 47649700
Mailing Address 256 Whitford Ave		Amount of Each Receipt this Period 100.00
City Nutley	State NJ	Zip Code 07110-1820
FEC ID number of contributing federal political committee.	C	
Name of Employer Self-Employed	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 735.00	

Full Name (Last, First, Middle Initial) B. Dr Aimee B. Klein		Date of Receipt 09 / 13 / 2012 Transaction ID : 47649702
Mailing Address 15 Boatswains Way		Amount of Each Receipt this Period 200.00
City Chelsea	State MA	Zip Code 02150-4017
FEC ID number of contributing federal political committee.	C	
Name of Employer MGH Institute of Health Professions	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. Dr Lisa Kristine Saladin		Date of Receipt 09 / 13 / 2012 Transaction ID : 47649705
Mailing Address 1325 Overcreek Ct		Amount of Each Receipt this Period 100.00
City Mount Pleasant	State SC	Zip Code 29464-9490
FEC ID number of contributing federal political committee.	C	
Name of Employer MUSC	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Craig A. Moore
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 160453

City Altamonte Springs State FL Zip Code 32716-0453

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

Name of Employer Florida Hospital Rehabilitation & Spor Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 47649707

Amount of Each Receipt this Period
 50.00

B. Diane Platz
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 404

City Glenwood State NJ Zip Code 07418-0404

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

Name of Employer Elmer Platz Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 47649708

Amount of Each Receipt this Period
 100.00

c. Dr Stephen McDavitt
Full Name (Last, First, Middle Initial)

Mailing Address 55 Spring St Unit B

City Scarborough State ME Zip Code 04074-8926

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 47649960

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Matthew R. Hyland
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 Overlook Dr
 City Valhalla State NY Zip Code 10595-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 47650398
 Amount of Each Receipt this Period
 100.00

B. Kristin Von Nieda
 Full Name (Last, First, Middle Initial)
 Mailing Address 3420 Warden Dr
 City Philadelphia State PA Zip Code 19129-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Temple University Occupation PT
 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
 09 / 13 / 2012
Transaction ID : 47650399
 Amount of Each Receipt this Period
 100.00

C. Dr Nancy B. Reese
 Full Name (Last, First, Middle Initial)
 Mailing Address PTC Bldg Rm 303
 201 N Donaghey Ave
 City Conway State AR Zip Code 72035-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Central Arkansas Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 47650400
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Dennis P. Langton
Full Name (Last, First, Middle Initial)

Mailing Address 727 Live Oak Dr

City El Cajon State CA Zip Code 92020-5633

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

Name of Employer E&L and Associates Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : 47650401

Amount of Each Receipt this Period
 50.00

B. Margaret D. Soucek
Full Name (Last, First, Middle Initial)

Mailing Address 178 W Elm Ave

City Mantua State NJ Zip Code 08051-1510

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

Name of Employer UM Hospital Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : 47650402

Amount of Each Receipt this Period
 100.00

c. Dr William D. Bandy
Full Name (Last, First, Middle Initial)

Mailing Address Ptc 300

City Conway State AR Zip Code 72035-0001

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

Name of Employer University of Central Arkansas Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : 47650412

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Ms Holly Clynych
Full Name (Last, First, Middle Initial)
Mailing Address 18220 Ginavale Ln
City Eden Prairie State MN Zip Code 55346-2107
FEC ID number of contributing federal political committee. **C**
Name of Employer St. Catherine University Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47650433
Amount of Each Receipt this Period 50.00

B. Deborah Gulbrandson
Full Name (Last, First, Middle Initial)
Mailing Address 429 High Rd
City Cary State IL Zip Code 60013-2630
FEC ID number of contributing federal political committee. **C**
Name of Employer Cary Physical Therapy Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47650436
Amount of Each Receipt this Period 100.00

C. Mr Rick Anthony Gawenda
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 971862
City Ypsilanti State MI Zip Code 48197-0224
FEC ID number of contributing federal political committee. **C**
Name of Employer Detroit Medical Center Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 735.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47650437
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 26 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. Mr Elmer Platz		Date of Receipt 09 / 13 / 2012 Transaction ID : 47650439
Mailing Address 418 Route 515		Amount of Each Receipt this Period 100.00
City Vernon	State NJ	Zip Code 07462-3027
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00	

Full Name (Last, First, Middle Initial) B. Steven Cassabaum		Date of Receipt 09 / 13 / 2012 Transaction ID : 47650453
Mailing Address 62944 Sunset Dr		Amount of Each Receipt this Period 250.00
City Nevada	State IA	Zip Code 50201-7947
FEC ID number of contributing federal political committee. C	Name of Employer 21st Century Rehab	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Eva Norman		Date of Receipt 09 / 13 / 2012 Transaction ID : 47650746
Mailing Address 11144 Hillsboro Ave N		Amount of Each Receipt this Period 50.00
City Champlin	State MN	Zip Code 55316-3128
FEC ID number of contributing federal political committee. C	Name of Employer Ortho Rehab Specialists	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Ms Jennifer Ann Lesko

Mailing Address 702 2nd Ave W Apt 205

City State Zip Code
Seattle WA 98119-3771

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

Name of Employer Occupation
Therapeutic Associates PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
387.50

Date of Receipt
09 / 13 / 2012
Transaction ID : 47650747

Amount of Each Receipt this Period
62.50

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

Mailing Address 1695 Peach Ave

City State Zip Code
Memphis TN 38112-5215

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

Name of Employer Occupation
None PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
09 / 13 / 2012
Transaction ID : 47654697

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Mr Steven C. Allen

Mailing Address Suite 106
23505 E Appleway Ave

City State Zip Code
Liberty Lake WA 99019-6003

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

Name of Employer Occupation
Therapeutic Associates PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.00

Date of Receipt
09 / 20 / 2012
Transaction ID : 47662330

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.50

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 28 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Billy Butch
Full Name (Last, First, Middle Initial)

Mailing Address 1033 Perry Hwy

City Pittsburgh State PA Zip Code 15237-2123

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

Name of Employer Physical Rehab Services Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 13 / 2012
Transaction ID : 47662369

Amount of Each Receipt this Period 500.00

B. Kamala Nicole Bongiorno
Full Name (Last, First, Middle Initial)

Mailing Address 676 Dekalb Pike Sutie 205

City Blue Bell State PA Zip Code 19422-1223

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

Name of Employer Apex Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2012
Transaction ID : 47667715

Amount of Each Receipt this Period 500.00

C. Timothy Spooner
Full Name (Last, First, Middle Initial)

Mailing Address 9097 E Desert Cove Dr Ste 110

City Scottsdale State AZ Zip Code 85260-6276

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

Name of Employer Spooner Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47667716

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Dr Joseph Adam Zeni
 Full Name (Last, First, Middle Initial)
 Mailing Address 1524 N Hancock St
 Unit 501
 City Philadelphia State PA Zip Code 19122-3813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Delaware Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2012
Transaction ID : 47667717
 Amount of Each Receipt this Period 90.00

B. Kimberly Meyer - Pelletier
 Full Name (Last, First, Middle Initial)
 Mailing Address 397 Flanders Rd
 City Coventry State CT Zip Code 06238-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2012
Transaction ID : 47668041
 Amount of Each Receipt this Period 150.00

C. Mr Randy Evan Boldt
 Full Name (Last, First, Middle Initial)
 Mailing Address 10901 156th Street
 City Davenport State IA Zip Code 52804-2066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rock Valley Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2012
Transaction ID : 47668049
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....▶	490.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Loretta Marx
Full Name (Last, First, Middle Initial)

Mailing Address 21720 Ne 105th Pl

City Redmond State WA Zip Code 98053-7653

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

Name of Employer Occupation
Kirkland Physical Therapy PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 20 / 2012
Transaction ID : 47668054

Amount of Each Receipt this Period
500.00

B. Mr Paul Olinger Kraushaar
Full Name (Last, First, Middle Initial)

Mailing Address 1737 Arbor Oaks Dr

City Muscatine State IA Zip Code 52761-2623

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

Name of Employer Occupation
Muscatine Physical Therapy Services PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 20 / 2012
Transaction ID : 47804276

Amount of Each Receipt this Period
500.00

C. Mr Trevor David Bardarson
Full Name (Last, First, Middle Initial)

Mailing Address 501 Apache Rd

City Houma State LA Zip Code 70360-6042

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

Name of Employer Occupation
ISR Physical Therapy PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 20 / 2012
Transaction ID : 47830245

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

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

Mailing Address 1005 Hardee Place

City Alexandria State VA Zip Code 22304-1719

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

Name of Employer American Physical Therapy Association Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **748.39**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2012

Transaction ID : 47830296

Amount of Each Receipt this Period
 41.67

B. Mr Matthew Wayne Elrod
Full Name (Last, First, Middle Initial)

Mailing Address 4782 Farndon Ct

City Fairfax State VA Zip Code 22032-1913

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

Name of Employer APTA Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.28**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2012

Transaction ID : 47830301

Amount of Each Receipt this Period
 20.84

C. Mandy Frohlich
Full Name (Last, First, Middle Initial)

Mailing Address 1363 Emerald Street, NE

City Washington State DC Zip Code 20002-5431

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

Name of Employer APTA Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **354.28**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2012

Transaction ID : 47830302

Amount of Each Receipt this Period
 20.84

SUBTOTAL of Receipts This Page (optional).....▶	83.35
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mary Jane Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 6500 Langleigh Way
 City Alexandria State VA Zip Code 22315-3454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 753.39

Date of Receipt
 09 / 20 / 2012
Transaction ID : 47830304
 Amount of Each Receipt this Period
 41.67

B. Karen Jost
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Madison St Apt 805
 City Alexandria State VA Zip Code 22314-1747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 754.00

Date of Receipt
 09 / 20 / 2012
Transaction ID : 47830307
 Amount of Each Receipt this Period
 42.00

C. Michael Matlack
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 19th Street South
 City Arlington State VA Zip Code 22204-5114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.28

Date of Receipt
 09 / 20 / 2012
Transaction ID : 47830308
 Amount of Each Receipt this Period
 20.84

SUBTOTAL of Receipts This Page (optional).....▶	104.51
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Justin D Moore
Full Name (Last, First, Middle Initial)
Mailing Address 4819 1st St S
City Arlington State VA Zip Code 22204-1315
FEC ID number of contributing federal political committee. **C**
Name of Employer APTA Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 746.86

Date of Receipt 09 / 20 / 2012
Transaction ID : 47830359
Amount of Each Receipt this Period 41.67

B. Ms Heather Lauren Smith
Full Name (Last, First, Middle Initial)
Mailing Address 2200 12th Ct N Apt 507
City Arlington State VA Zip Code 22201-6512
FEC ID number of contributing federal political committee. **C**
Name of Employer APTA Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.28

Date of Receipt 09 / 20 / 2012
Transaction ID : 47830363
Amount of Each Receipt this Period 20.84

C. Mr Jeffrey Thomas Hamilton
Full Name (Last, First, Middle Initial)
Mailing Address 12234 Cottonwood Rd
City Cottonwood State AL Zip Code 36320-4279
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47835071
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 112.51
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Kenneth Scott Call
 Full Name (Last, First, Middle Initial)
 Mailing Address 3509 S Tacoma St
 City Kennewick State WA Zip Code 99337-3739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West Kennewick Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47835073
 Amount of Each Receipt this Period 42.00

B. Sandra Lee Norby
 Full Name (Last, First, Middle Initial)
 Mailing Address 789 Holton Dr
 City Le Mars State IA Zip Code 51031-3757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Le Mars Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47835074
 Amount of Each Receipt this Period 100.00

C. Mr James Edward Zachazewski
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 Fuller Brook Ave
 City Needham State MA Zip Code 02492-1226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Massachusetts General Hospital Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47835082
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶	192.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Jim Ronald Rivard
 Full Name (Last, First, Middle Initial)
 Mailing Address 1560 140th Ave NE Suite 100
 City Bellevue State WA Zip Code 98005-4571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 20 / 2012**
Transaction ID : 47835085
 Amount of Each Receipt this Period **100.00**

B. Dr Secili Hurley DeStefano
 Full Name (Last, First, Middle Initial)
 Mailing Address 43217 Lindsay Marie Dr
 City Ashburn State VA Zip Code 20147-3111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 20 / 2012**
Transaction ID : 47835091
 Amount of Each Receipt this Period **100.00**

C. Jay H. Segal
 Full Name (Last, First, Middle Initial)
 Mailing Address 1537 Bent River Cir
 City Birmingham State AL Zip Code 35216-5394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HPRC Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 20 / 2012**
Transaction ID : 47835208
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional).....	300.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Timothy Schell
Full Name (Last, First, Middle Initial)

Mailing Address 319 Nicklaus Ct

City Grove City State PA Zip Code 16127-3459

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47835503

Amount of Each Receipt this Period 500.00

B. Mr Alan B. Crothers
Full Name (Last, First, Middle Initial)

Mailing Address 2388 W Cogburn St

City Meridian State ID Zip Code 83642-7174

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47835981

Amount of Each Receipt this Period 50.00

C. Julie Lee Rosen
Full Name (Last, First, Middle Initial)

Mailing Address 445 Park Ave

City Glencoe State IL Zip Code 60022-1527

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

Name of Employer Sava Senior Care Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47836007

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Sheridan Elizabeth Payne
 Full Name (Last, First, Middle Initial)
 Mailing Address 1175 Cynthia Ln
 City Spring Hill State TN Zip Code 37174-4520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **208.35**

Date of Receipt **09 / 20 / 2012**
Transaction ID : 47836014
 Amount of Each Receipt this Period **41.67**

B. Brad A. Thuringer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 17th Ave S
 City Brookings State SD Zip Code 57006-4099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lake Area Technical Institute Occupation PTA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt **09 / 20 / 2012**
Transaction ID : 47836016
 Amount of Each Receipt this Period **100.00**

C. Craig Kopet
 Full Name (Last, First, Middle Initial)
 Mailing Address 16259 Sylvester Rd Sw Ste 102
 City Burien State WA Zip Code 98166-3094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Highline PT & Sports Clinic Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **09 / 20 / 2012**
Transaction ID : 47836641
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional).....	241.67
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Dr Susan Layfield
Full Name (Last, First, Middle Initial)

Mailing Address 24109 Dequincy Ct

City Canoga Park State CA Zip Code 91304-6130

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

Name of Employer Layfield and Associates PT Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47836642

Amount of Each Receipt this Period 100.00

B. Jeanine Marie Gunn
Full Name (Last, First, Middle Initial)

Mailing Address 1944 Pacific Ave Apt 900

City Tacoma State WA Zip Code 98402-3129

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47836644

Amount of Each Receipt this Period 100.00

C. Mr Paul Andrew Hildreth
Full Name (Last, First, Middle Initial)

Mailing Address 930 Marengo St

City New Orleans State LA Zip Code 70115-2753

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 20 / 2012
Transaction ID : 47836647

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. Sheila K. Nicholson		Date of Receipt
Mailing Address 6143 Whimbrelwood Dr		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Lithia FL 33547-4101		Transaction ID : 47836654
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Self-Employed	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="935.00"/>	

Full Name (Last, First, Middle Initial) B. Dr David A. Pariser		Date of Receipt
Mailing Address 5319 Manor Ct		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Crestwood KY 40014-8845		Transaction ID : 47836655
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer Bellarmine University	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="575.00"/>	

Full Name (Last, First, Middle Initial) C. Drew G. Bossen		Date of Receipt
Mailing Address 4191 Westcott Dr Ne		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City State Zip Code Iowa City IA 52240-7788		Transaction ID : 47836656
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Progressive Rehab Associates	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1350.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="310.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Warren Dean McCall
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 W Academy St
 City State Zip Code
 Williamston NC 27892-2060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Roanoke Therapeutic Services, Inc. PT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2012
Transaction ID : 47837216
 Amount of Each Receipt this Period
 50.00

B. Mr Glenn P. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 71 McBry Dr
 City State Zip Code
 Dover DE 19901-4407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed PT
 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
 09 / 10 / 2012
Transaction ID : 47848590
 Amount of Each Receipt this Period
 250.00

C. Mrs Emma W. White
 Full Name (Last, First, Middle Initial)
 Mailing Address 1262 Dovershire Ct
 City State Zip Code
 High Point NC 27262-7306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 High Point Regional Health System PT
 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
 09 / 24 / 2012
Transaction ID : 47848652
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. William Franklin McGehee
 Full Name (Last, First, Middle Initial)
 Mailing Address 306 Circuit Ct
 City East Peoria State IL Zip Code 61611-1433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bradley University Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 26 / 2012
Transaction ID : 47868774
 Amount of Each Receipt this Period 125.00

B. Mr Glenn P. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 71 McBry Dr
 City Dover State DE Zip Code 19901-4407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 25 / 2012
Transaction ID : 47872456
 Amount of Each Receipt this Period 500.00

C. Jerry Klug
 Full Name (Last, First, Middle Initial)
 Mailing Address 1475 1st Ave Sw
 City Jacksonville State AL Zip Code 36265-3337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AL Physical Rehab Service Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1875.01

Date of Receipt 09 / 27 / 2012
Transaction ID : 47872985
 Amount of Each Receipt this Period 208.37

SUBTOTAL of Receipts This Page (optional).....▶	833.37
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Alan J. Howell
Full Name (Last, First, Middle Initial)

Mailing Address 5400 Kennedy Ave

City Cincinnati State OH Zip Code 45213-2664

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

Name of Employer Self-Employed Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
09 / 27 / 2012
Transaction ID : 47872987

Amount of Each Receipt this Period
50.00

B. Mr Ruben Salinas
Full Name (Last, First, Middle Initial)

Mailing Address 21540 Yorba Linda Blvd Ste A

City Yorba Linda State CA Zip Code 92887-3765

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

Name of Employer Salinas Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
09 / 27 / 2012
Transaction ID : 47872988

Amount of Each Receipt this Period
50.00

C. Kathryn B. Stenslie
Full Name (Last, First, Middle Initial)

Mailing Address 8907 River Rd

City Columbus State GA Zip Code 31904-1123

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

Name of Employer PT Pros Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
09 / 27 / 2012
Transaction ID : 47872989

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 43 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Dr Barbara Connolly

Mailing Address 2805 N. Hwy A1A
 #504

City State Zip Code
 Indialantic FL 32903-2158

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

Name of Employer Occupation
 Retired PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : 47872992

Amount of Each Receipt this Period
 125.00

Full Name (Last, First, Middle Initial)
B. Mr Peter J. McMEnamin

Mailing Address 130 N Garland Ct Apt 3805

City State Zip Code
 Chicago IL 60602-4836

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

Name of Employer Occupation
 Northwestern University PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : 47872994

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Linda E Arslanian

Mailing Address 230 Bray St

City State Zip Code
 Gloucester MA 01930-1551

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

Name of Employer Occupation
 Health Partners PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : 47872995

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Mr Richard C. Larsen
Full Name (Last, First, Middle Initial)

Mailing Address 649 Countryside Circle

City Hudson State WI Zip Code 54016-7827

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

Name of Employer LSMPT Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : 47872996

Amount of Each Receipt this Period
 50.00

B. Mary Pat Corrigan Jobs
Full Name (Last, First, Middle Initial)

Mailing Address 977 Giaroli St

City Memphis State TN Zip Code 38122-1934

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

Name of Employer Methodist Health Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : 47872999

Amount of Each Receipt this Period
 50.00

c. Mr Arthur Clarence Bronsord
Full Name (Last, First, Middle Initial)

Mailing Address 16917 Ketocin Church Rd

City Purcellville State VA Zip Code 20132-3542

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

Name of Employer State of the Art Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2012

Transaction ID : 47873001

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. Linda Duke			Date of Receipt 09 / 27 / 2012 Transaction ID : 47873002
Mailing Address 4241 E Page Ave			Amount of Each Receipt this Period 50.00
City Gilbert	State AZ	Zip Code 85234-0737	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 335.00	
Name of Employer Barner Baywood Medical Center		Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Cathleen M. Tarro			Date of Receipt 09 / 27 / 2012 Transaction ID : 47873003
Mailing Address 8301 44th St W			Amount of Each Receipt this Period 45.00
City University Place	State WA	Zip Code 98466-2305	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 395.00	
Name of Employer Self-Employed		Occupation PTA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr Jeffrey J. Zimmerman			Date of Receipt 09 / 27 / 2012 Transaction ID : 47873004
Mailing Address 3405 S 117th St			Amount of Each Receipt this Period 30.00
City Omaha	State NE	Zip Code 68144-4642	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 270.00	
Name of Employer Specialized Physical Therapy		Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 46 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Ryan Wayne Huff

Mailing Address 1404 Greenview Way Sw

City Jacksonville State AL Zip Code 36265-3315

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

Name of Employer AL Physical Rehab Service Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 47873006

Amount of Each Receipt this Period
50.00

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

Mailing Address 2236 Sunrise Way

City Jamison State PA Zip Code 18929-1051

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

Name of Employer Cornerstone PT Assoc. Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 47873008

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Dr Kathleen Ann Luedtke-Hoffmann

Mailing Address 2722 Woods Ln

City Garland State TX Zip Code 75044-2808

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

Name of Employer Texas Women's University Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 47873009

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **200.00**

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

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

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

FOR LINE NUMBER: PAGE 47 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Kathleen M. Picard
 Full Name (Last, First, Middle Initial)
 Mailing Address 2249 River Rd S
 City Lakeland State MN Zip Code 55043-9775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Big Stone Therapies Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 09 / 27 / 2012
Transaction ID : 47873010
 Amount of Each Receipt this Period 50.00

B. Dr Krystina Nicole Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 47478 Parkgate Ct
 City Canton State MI Zip Code 48188-4706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rehabilitation Institute of Michigan Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2012
Transaction ID : 47873016
 Amount of Each Receipt this Period 25.00

C. Ms Julie M. Lombardo
 Full Name (Last, First, Middle Initial)
 Mailing Address 411 Prairie Heights Dr Ste 101
 City Verona State WI Zip Code 53593-2238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Capitol PT Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2012
Transaction ID : 47873068
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
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 48 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

A. Nancy J. Roberge
 Full Name (Last, First, Middle Initial)
 Mailing Address 148 Linden St Ste B-8
 City Wellesley State MA Zip Code 02482-7905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chestnut Hill PT Associates Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 09 / 27 / 2012
Transaction ID : 47873069
 Amount of Each Receipt this Period 250.00

B. John D. Barnes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1005 Hardee Place
 City Alexandria State VA Zip Code 22304-1719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Physical Therapy Association Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 790.06

Date of Receipt 09 / 27 / 2012
Transaction ID : 47876279
 Amount of Each Receipt this Period 41.67

C. Mr Matthew Wayne Elrod
 Full Name (Last, First, Middle Initial)
 Mailing Address 4782 Farndon Ct
 City Fairfax State VA Zip Code 22032-1913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer APTA Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.12

Date of Receipt 09 / 27 / 2012
Transaction ID : 47876289
 Amount of Each Receipt this Period 20.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 312.51
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Mandy Frohlich

Mailing Address 1363 Emerald Street, NE

City Washington State DC Zip Code 20002-5431

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

Name of Employer APTA Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 47876290

Amount of Each Receipt this Period
20.84

Full Name (Last, First, Middle Initial)
B. Mary Jane Harris

Mailing Address 6500 Langleigh Way

City Alexandria State VA Zip Code 22315-3454

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

Name of Employer APTA Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **795.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 47876293

Amount of Each Receipt this Period
41.67

Full Name (Last, First, Middle Initial)
C. Karen Jost

Mailing Address 400 Madison St Apt 805

City Alexandria State VA Zip Code 22314-1747

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

Name of Employer APTA Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **796.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 47876297

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional).....▶	104.51
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 50 OF 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

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

Mailing Address 3908 19th Street South

City State Zip Code
Arlington VA 22204-5114

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

Name of Employer Occupation
APTA Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.12

Date of Receipt
09 / 27 / 2012
Transaction ID : 47876298

Amount of Each Receipt this Period
20.84

Full Name (Last, First, Middle Initial)
B. Justin D Moore

Mailing Address 4819 1st St S

City State Zip Code
Arlington VA 22204-1315

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

Name of Employer Occupation
APTA PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
788.53

Date of Receipt
09 / 27 / 2012
Transaction ID : 47876299

Amount of Each Receipt this Period
41.67

Full Name (Last, First, Middle Initial)
C. Ms Heather Lauren Smith

Mailing Address 2200 12th Ct N Apt 507

City State Zip Code
Arlington VA 22201-6512

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

Name of Employer Occupation
APTA PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.12

Date of Receipt
09 / 27 / 2012
Transaction ID : 47876304

Amount of Each Receipt this Period
20.84

SUBTOTAL of Receipts This Page (optional).....▶	83.35
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 83
	<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial) A. Mr Joseph Leroy Shine Jr.		Date of Receipt MM / DD / YYYY 09 / 25 / 2012 Transaction ID : 47896906
Mailing Address 5901 Camphor St		Amount of Each Receipt this Period 100.00
City Metairie	State LA	Zip Code 70003-3633
FEC ID number of contributing federal political committee. C	Name of Employer Performance Physical Therapy	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Marlene A DeRosa		Date of Receipt MM / DD / YYYY 09 / 28 / 2012 Transaction ID : 47899499
Mailing Address 3285 S Skye Way		Amount of Each Receipt this Period 250.00
City Flagstaff	State AZ	Zip Code 86001-9142
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation PT
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. Carolyn Dale Pape		Date of Receipt MM / DD / YYYY 09 / 28 / 2012 Transaction ID : 47899503
Mailing Address 146 Amber Ln		Amount of Each Receipt this Period 250.00
City Carbondale	State IL	Zip Code 62902-8010
FEC ID number of contributing federal political committee. C	Name of Employer Addus Home Health	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 52 OF 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. Dr Carolynn Patten

Mailing Address 719 Ne 5th St

City State Zip Code
 Gainesville FL 32601-4305

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

Name of Employer Occupation
 University of Florida PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2012
Transaction ID : 48063759

Amount of Each Receipt this Period
 90.00

Full Name (Last, First, Middle Initial)
B. Ms Holly Clynych

Mailing Address 18220 Ginavale Ln

City State Zip Code
 Eden Prairie MN 55346-2107

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

Name of Employer Occupation
 St. Catherine University PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2012
Transaction ID : 48096408

Amount of Each Receipt this Period
 20.00

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	23002.65

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

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

FOR LINE NUMBER: PAGE 53 OF 83
(check only one)

<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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)
A. SunTrust Bank

Mailing Address Old Town Branch
King Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.36

Date of Receipt
09 / 28 / 2012
Transaction ID : 48071222

Amount of Each Receipt this Period
54.43

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

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

Amount of Each Receipt this Period

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	54.43
TOTAL This Period (last page this line number only).....▶	54.43

**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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Devin Nunes Campaign Committee

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Devin Nunes

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 21

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 47667722

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. NEW PAC

Mailing Address P.O. Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement

011

Category/
Type

Candidate Name

NEW PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 47667723

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Committee To Elect Michelle Lujan Grisham

Mailing Address 2015 Dietz Pl Nw

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Michelle Grisham

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 47670536

Amount of Each Disbursement this Period

3000.00

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

8000.00

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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Max Baucus

Mailing Address PO Box 586

City Helena State MT Zip Code 59624

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Max Baucus

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MT District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800126

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Max Baucus

Mailing Address PO Box 586

City Helena State MT Zip Code 59624

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Max Baucus

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MT District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800128

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. ARK PAC

Mailing Address P.O. Box 606

City Rogers State AR Zip Code 72757

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800129

Amount of Each Disbursement this Period

2500.00

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

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Bernie Sanders

Mailing Address PO Box 391

City Burlington State VT Zip Code 05402

Purpose of Disbursement

011

Candidate Name

Mr. Bernard Sanders

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VT District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800130

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Cicilline Committee

Mailing Address 236 Hope Street

City Providence State RI Zip Code 02906

Purpose of Disbursement

011

Candidate Name

Rep. David N. Cicilline

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: RI District: 01

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800131

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Courtney For Congress

Mailing Address 38 Risley Road

City Vernon State CT Zip Code 06066

Purpose of Disbursement

011

Candidate Name

Rep. Joseph D. Courtney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 02

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800132

Amount of Each Disbursement this Period

1000.00

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Paul Gosar For Congress

Mailing Address P.O. Box 3586

City State Zip Code
Flagstaff AZ 86003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Paul Gosar

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800133

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Mike Kelly For Congress

Mailing Address PO Box 476

City State Zip Code
Lyndora PA 16045

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Mike Kelly

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800134

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. KELLY PAC

Mailing Address 901 N. Washington Street
Suite 102

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800135

Amount of Each Disbursement this Period

3000.00

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

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

7500.00

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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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Rodney Alexander For Congress Inc.

Mailing Address 319 Nancy'S Road

City Quitman State LA Zip Code 71268

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Rodney Alexander

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 05

Date of Disbursement

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

Transaction ID : 47800136

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Lou Barletta For Congress

Mailing Address P.O. Box 128

City Hazleton State PA Zip Code 18201

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Lou Barletta

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 11

Date of Disbursement

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

Transaction ID : 47800137

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Berkley for Senate

Mailing Address 3077 E WARM SPRINGS RD SUITE 300

City Las Vegas State NV Zip Code 89120

Purpose of Disbursement

011

Category/
Type

Candidate Name

Shelley Berkley

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

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

Transaction ID : 47800138

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

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

7	0	0	0	0	0	0	0	0	0

7	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Sanford Bishop For Congress

Mailing Address P. O. Box 909

City State Zip Code
Columbus GA 31902

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Sanford D. Bishop Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 02

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800139

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Tim Bishop For Congress

Mailing Address PO Box 437

City State Zip Code
Farmingville NY 11738

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Timothy Bishop

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 01

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800140

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Boustany for Congress

Mailing Address P.O. Box 80126

City State Zip Code
Lafayette LA 70598

Purpose of Disbursement

011

Category/
Type

Candidate Name

Charles Boustany

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800141

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)..... ▶

**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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Castro For Congress

Mailing Address PO Box 544

City San Antonio State TX Zip Code 78292

Purpose of Disbursement

011

Candidate Name

Mr. Joaquin Castro

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 20

Date of Disbursement

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

Transaction ID : 47800142

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Chandler for Congress

Mailing Address P.O. Box 12678

City Lexington State KY Zip Code 40583

Purpose of Disbursement

011

Candidate Name

Ben Chandler

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: KY District: 06

Date of Disbursement

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

Transaction ID : 47800143

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Coffman For Congress

Mailing Address 9249 South Broadway
#200-501

City Highlands Ranch State CO Zip Code 80129

Purpose of Disbursement

011

Candidate Name

Mr. Michael Coffman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CO District: 06

Date of Disbursement

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

Transaction ID : 47800144

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

8	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Mark Critz For Congress Committee

Mailing Address 647 Main Street
Suite 110

City Johnstown State PA Zip Code 15901

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Mark S. Critz

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800145

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Rodney For Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Rodney Davis

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800147

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Susan Davis For Congress

Mailing Address PO Box 84049

City San Diego State CA Zip Code 92138

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Susan A. Davis

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 53

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800148

Amount of Each Disbursement this Period

1000.00

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

7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Rosa Delauro

Mailing Address 12 Trumbull Street

City New Haven State CT Zip Code 06511

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Rosa Delauro

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800149

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Charlie Dent for Congress

Mailing Address P.O. Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement

011

Category/
Type

Candidate Name

Charlie Dent

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800150

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Team Emerson For Jo Ann Emerson

Mailing Address P.O. Box 822
400 Broadway, Suite 501

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Jo Emerson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800153

Amount of Each Disbursement this Period

1000.00

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

4000.00

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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Fitzpatrick for Congress

Mailing Address P.O. Box 1772

City Doylestown State PA Zip Code 18901

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mike Fitzpatrick

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

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

Transaction ID : 47800155

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Gardner For Congress 2012

Mailing Address 9227 E. Lincoln Ave., #200-235

City Lone Tree State CO Zip Code 80124

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Cory Gardner

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CO District: 04

Date of Disbursement

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

Transaction ID : 47800156

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Gerlach for Congress

Mailing Address 700 12th Street, NW
Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Category/
Type

Candidate Name

James Gerlach

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

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

Transaction ID : 47800158

Amount of Each Disbursement this Period

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

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

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

7	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

3	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Graves For Congress

Mailing Address 2345 Grand, Suite 2400

City Kansas City State MO Zip Code 64108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Samuel Graves

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District: 06

Date of Disbursement

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

Transaction ID : 47800159

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Friends Of Nan Hayworth

Mailing Address P.O. Box 188

City Carmel State NY Zip Code 10512

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Nan Hayworth

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

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

Transaction ID : 47800160

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Denny Heck For Congress

Mailing Address PO Box 235

City Olympia State WA Zip Code 98507

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Dennis Heck

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

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

Transaction ID : 47800161

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0

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

5	0	0	0	0	0	0	0	0	0
5	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Martin Heinrich For Senate

Mailing Address P.O. Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement

011

Candidate Name

Mr. Martin Heinrich

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800162

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Horsford For Congress

Mailing Address 6100 Elton Ave Suite 1000

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement

011

Candidate Name

Mr. Steven Horsford

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District: 04

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800163

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Steve Israel For Congress Committee

Mailing Address P.O. Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement

011

Candidate Name

Mr. Steve Israel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 02

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800164

Amount of Each Disbursement this Period

1000.00

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

8000.00

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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Issa For Congress

Mailing Address PO Box 760

City Vista State CA Zip Code 92085

Purpose of Disbursement

011

Candidate Name

Rep. Darrell Issa

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 49

Date of Disbursement

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

Transaction ID : 47800165

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Bill Johnson For Congress Committee

Mailing Address P.O. Box 14496

City Poland State OH Zip Code 44514

Purpose of Disbursement

011

Candidate Name

Rep. Bill Johnson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

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

Transaction ID : 47800166

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Join Our Efforts PAC (JOE PAC)

Mailing Address 610 Harper Avenue

City Jenkintown State PA Zip Code 19046

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 47800167

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
0	0	0	0	0	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	0	0	0	0
0	0	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0	0	0
0	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Walter Jones Committee

Mailing Address PO Box 3962

City Greenville State NC Zip Code 27836

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Walter Jones

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 03

Date of Disbursement

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

Transaction ID : 47800168

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Kind For Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Ronald Kind

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

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

Transaction ID : 47800169

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Kissell For Congress

Mailing Address P.O. Box 1530

City Biscoe State NC Zip Code 27209

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Larry Kissell

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 08

Date of Disbursement

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

Transaction ID : 47800170

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0

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

6	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0

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

6	0	0	0	0	0	0	0	0	0
6	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Latta For Congress

Mailing Address PO Box 106

City Bowling Green State OH Zip Code 43402

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Robert Latta

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800171

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Levin For Congress

Mailing Address PO Box 37

City Roseville State MI Zip Code 48066

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sander Levin

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800173

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. People For Ben

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Ben Ray Lujan Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800174

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

--

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. LYNN PAC

Mailing Address P.O. Box 1872

City Topeka State KS Zip Code 66601

Purpose of Disbursement

011

Category/
Type

Candidate Name
LYNN PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 47800175

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Marino For Congress

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Thomas Marino

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 10

Date of Disbursement

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

Transaction ID : 47800176

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Matsui For Congress

Mailing Address PO Box 1738

City Sacramento State CA Zip Code 95812

Purpose of Disbursement

011

Category/
Type

Candidate Name
Rep. Doris Matsui

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

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

Transaction ID : 47800177

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

6	0	0	0	0	0	0	0	0	0
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0	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

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

011

Candidate Name

Ms. Carolyn McCarthy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800178

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. McIntyre for Congress

Mailing Address P.O. Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement

011

Candidate Name

Mike McIntyre

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800179

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Cathy McMorris Rodgers for Congress

Mailing Address P.O. Box 137

City Spokane State WA Zip Code 99210

Purpose of Disbursement

011

Candidate Name

Cathy McMorris

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800180

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)..... ▶

--

**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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Pat Meehan For Congress

Mailing Address 50 S. Providence Road

City Media State PA Zip Code 19063

Purpose of Disbursement

011

Candidate Name

Mr. Patrick Meehan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

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

Transaction ID : 47800181

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Menendez For Senate

Mailing Address One Gateway Center Suite 520

City Newark State NJ Zip Code 07102

Purpose of Disbursement

011

Candidate Name

Mr. Robert Menendez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

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

Transaction ID : 47800182

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Gary Miller for Congress

Mailing Address 721 S. Brea Canyon Road
Suite 7

City Walnut State CA Zip Code 91789

Purpose of Disbursement

011

Candidate Name

Gary Miller

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 42

Date of Disbursement

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

Transaction ID : 47800183

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
0	0	0	0	0	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	0	0	0	0
0	0	0	0	0	0	0	0	0	0

7	5	0	0	0	0	0	0	0	0
0	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Pascrell For Congress

Mailing Address P.O. Box 640

City Totowa State NJ Zip Code 07511

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. William J. Pascrell Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 08

Date of Disbursement

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

Transaction ID : 47800184

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Jon Runyan For Congress, Inc

Mailing Address PO Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Jon Daniel Runyan

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 03

Date of Disbursement

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

Transaction ID : 47800185

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Loretta Sanchez

Mailing Address P.O. Box 6037

City Santa Ana State CA Zip Code 92706

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Loretta Sanchez

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 46

Date of Disbursement

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

Transaction ID : 47800187

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

6	0	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

6	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Pete Stark Re-Election Committee

Mailing Address P.O. Box 8331

City State Zip Code
Fremont CA 94537

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Pete Stark

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800194

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Strickland For Congress 2012

Mailing Address 603 E Alton Ave Ste H

City State Zip Code
Santa Ana CA 92705

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Anthony Strickland

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 26

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800195

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Betty Sutton For Congress

Mailing Address PO Box 14693

City State Zip Code
Copley OH 44321

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Betty S. Sutton

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 13

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800197

Amount of Each Disbursement this Period

3000.00

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

10500.00

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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Lee Terry For Congress

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154

Purpose of Disbursement

011

Category/
Type

Candidate Name

Lee Terry

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

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

Transaction ID : 47800198

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Whitehouse For Senate

Mailing Address P.O. Box 40280

City Providence State RI Zip Code 02940

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Sheldon Whitehouse

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: RI District:

Date of Disbursement

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

Transaction ID : 47800199

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Joe Wilson For Congress Committee

Mailing Address PO Box 2145

City West Columbia State SC Zip Code 29171

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Joe Wilson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

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

Transaction ID : 47800200

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)..... ▶

5	0	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Tim Murphy For Congress

Mailing Address P.O. Box 24551

City Pittsburgh State PA Zip Code 15234

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Tim Murphy

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 18

Date of Disbursement

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

Transaction ID : 47800201

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Volunteers For Shimkus

Mailing Address PO Box 661

City Collinsville State IL Zip Code 62234

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. John Shimkus

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 20

Date of Disbursement

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

Transaction ID : 47800202

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Louise Slaughter Re-Election Committee

Mailing Address P.O. Box 730

City Honeoye State NY Zip Code 14471

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Louise Slaughter

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 28

Date of Disbursement

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

Transaction ID : 47800203

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

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

1	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Schakowsky For Congress

Mailing Address P.O. Box 5130

City State Zip Code
Evanston IL 60204

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Jan D. Schakowsky

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800204

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bill Owens For Congress

Mailing Address PO Box 1575

City State Zip Code
Plattsburgh NY 12901

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bill Owens

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800205

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. CAMPAC

Mailing Address 5915 Eastman Avenue
Suite 100

City State Zip Code
Midland MI 48640

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800206

Amount of Each Disbursement this Period

5000.00

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

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

8500.00

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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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. People For Derek Kilmer

Mailing Address PO Box 1574

City Gig Harbor State WA Zip Code 98335

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Derek Kilmer

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WA District: 06

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800207

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Hatch Election Committee Inc

Mailing Address PO Box 900427

City Sandy State UT Zip Code 84090

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Orrin Hatch

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: UT District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800208

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Duckworth For Congress

Mailing Address P.O. Box 8867

City Rolling Meadows State IL Zip Code 60008

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. L. Tammy Duckworth

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800209

Amount of Each Disbursement this Period

2500.00

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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Glenn Thompson

Mailing Address PO Box 1112

City State Zip Code
State College PA 16804

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Glenn Thompson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800210

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Michael Burgess For Congress

Mailing Address PO Box 2334

City State Zip Code
Denton TX 76202

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Michael C. Burgess

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800211

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Rob Wittman For Congress

Mailing Address P.O. Box 999

City State Zip Code
Montross VA 22520

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Rob Wittman

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2012

Transaction ID : 47800213

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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Walorski For Congress Inc

Mailing Address PO Box 954

City State Zip Code
Mishawaka IN 46546

Purpose of Disbursement

011

Category/
Type

Candidate Name

Jackie Walorski

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 02

Date of Disbursement

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

Transaction ID : 47800247

Amount of Each Disbursement this Period

3	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Paul Cook For Congress

Mailing Address PO Box 365

City State Zip Code
Yucca Valley CA 92286

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Paul Cook

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 08

Date of Disbursement

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

Transaction ID : 47800341

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Dave Crooks For Congress

Mailing Address 324 East Main Street
PO Box 686

City State Zip Code
Washington IN 47501

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. David Crooks

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 08

Date of Disbursement

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

Transaction ID : 47800969

Amount of Each Disbursement this Period

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

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

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

9	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 Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Lampson For Congress

Mailing Address P.O. Box 861253

City State Zip Code
Plano TX 75086

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Nicholas Lampson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800970

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Kirkpatrick For Arizona

Mailing Address PO Box 12011

City State Zip Code
Casa Grande AZ 85130

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Ann Kirkpatrick

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2012

Transaction ID : 47800971

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin For Congress

Mailing Address P.O. Box 696

City State Zip Code
Madison WI 53701

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Tammy Baldwin

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2012

Transaction ID : 47858737

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)..... ▶

190500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Committee to Elect Julie Rogers

Mailing Address 3428 Marlane Avenue

City Kalamazoo State MI Zip Code 49006

Purpose of Disbursement
Julie Rogers, Local MI

011

Category/
Type

Candidate Name

Julie Rogers

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800989

Amount of Each Disbursement this Period

499.00

Julie Rogers, Local MI

Full Name (Last, First, Middle Initial)

B. Deb Lavender for State Representative

Mailing Address 1797 W. Adams

City Kirkwood State MO Zip Code 63122

Purpose of Disbursement
Deb Lavender, STATE HOUSE 90th MO

011

Category/
Type

Candidate Name

Deb Lavender

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District: 90

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800990

Amount of Each Disbursement this Period

2000.00

Deb Lavender, STATE HOUSE 90th MO

Full Name (Last, First, Middle Initial)

C. Committee to Elect Elizabeth Thomson

Mailing Address 2401 Morrow Road NE

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement
Elizabeth Thomson, STATE HOUSE 24th NM

011

Category/
Type

Candidate Name

Elizabeth Thomson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District: 24

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2012

Transaction ID : 47800995

Amount of Each Disbursement this Period

2000.00

Elizabeth Thomson, STATE HOUSE 24th NM

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

4499.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Ryan Ferns for WV House of Delegates

Mailing Address 3 Miller Place

City State Zip Code
Wheeling WV 26003

Purpose of Disbursement
Ryan Ferns, STATE HOUSE 3rd WV

Category/
Type

Candidate Name

WV Del. Ryan Ferns

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WV District: 03

Date of Disbursement

/ /

Transaction ID : 47800998

Amount of Each Disbursement this Period

Ryan Ferns, STATE HOUSE 3rd WV

Full Name (Last, First, Middle Initial)

B. Sean Roberts for State Representative

Mailing Address 114 West Main Street

City State Zip Code
Hominy OK 74035

Purpose of Disbursement
Sean Roberts, STATE HOUSE 36th OK

Category/
Type

Candidate Name

Sean Roberts

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OK District: 36

Date of Disbursement

/ /

Transaction ID : 47801771

Amount of Each Disbursement this Period

Sean Roberts, STATE HOUSE 36th OK

Full Name (Last, First, Middle Initial)

C. Arthur Hulbert for OK State House

Mailing Address 1409 Saddlebrooke

City State Zip Code
Fort Gibson OK 74434

Purpose of Disbursement
Arthur Hulbert, STATE HOUSE 14th OK

Category/
Type

Candidate Name

Arthur Hulbert

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OK District: 14

Date of Disbursement

/ /

Transaction ID : 47801773

Amount of Each Disbursement this Period

Arthur Hulbert, STATE HOUSE 14th OK

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Physical Therapy Association Physical Therapy Political Action Committee (PT-PAC)

Full Name (Last, First, Middle Initial)

A. Lowe for Statehouse

Mailing Address 507 West Cheves Street

City Florence State SC Zip Code 29501

Purpose of Disbursement
Phillip Lowe, STATE HOUSE 60th SC

Candidate Name

Phillip Lowe

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: SC District: 60

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2012

Transaction ID : 47802477

Amount of Each Disbursement this Period

499.00

Phillip Lowe, STATE HOUSE 60th SC

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

499.00

10998.00
