

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 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 10 / 01 / 2011 through 10 / 31 / 2011

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 11 / 18 / 2011

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)

Page 2

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="2011"/>		421861.73
(b) Cash on Hand at Beginning of Reporting Period.....	431720.44	
(c) Total Receipts (from Line 19)	61822.30	514852.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	493542.74	936714.10
7. Total Disbursements (from Line 31).....	28500.00	471671.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	465042.74	465042.74
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

FEC Form 3X (Rev. 06/2004)

Page 3

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).....	22330.28	230197.02
(ii) Unitemized	39437.65	281796.34
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	61767.93	511993.36
(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)	61767.93	511993.36
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	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	54.37	859.01
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))..... ▶	61822.30	514852.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	61822.30	514852.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	28500.00	471100.00
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	140.00
(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	140.00
29. Other Disbursements	0.00	431.36
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)) ..	28500.00	471671.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28500.00	471671.36

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	61767.93	511993.36
34. Total Contribution Refunds (from Line 28(d))	0.00	140.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	61767.93	511853.36
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 60
	<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 Victoria S T Tilley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Bartlett Cir
 City Hillsborough State NC Zip Code 27278-6772
 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 **700.00**

Date of Receipt **10 / 13 / 2011**
Transaction ID : 42203687
 Amount of Each Receipt this Period **100.00**

B. Ann Giffin
 Full Name (Last, First, Middle Initial)
 Mailing Address Box 52 UTMC
 1924 Alcoa Hwy
 City Knoxville State TN Zip Code 37901-0052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Tennessee Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **405.00**

Date of Receipt **10 / 04 / 2011**
Transaction ID : 42260218
 Amount of Each Receipt this Period **45.00**

C. 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 **500.00**

Date of Receipt **10 / 04 / 2011**
Transaction ID : 42260220
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional).....▶	395.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 60
	<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. 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 ▼ 730.00

Date of Receipt 10 / 04 / 2011
Transaction ID : 42260221
 Amount of Each Receipt this Period 45.00

B. 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 ▼ 730.93

Date of Receipt 10 / 04 / 2011
Transaction ID : 42260222
 Amount of Each Receipt this Period 38.47

C. Kenneth Joseph Harwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 12551 Manderley Way
 City Herndon State VA Zip Code 20171-1828
 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 ▼ 456.25

Date of Receipt 10 / 04 / 2011
Transaction ID : 42260224
 Amount of Each Receipt this Period 22.75

SUBTOTAL of Receipts This Page (optional).....▶ 106.22
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 60
	<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 10 / 04 / 2011 Transaction ID : 42260227
Mailing Address 1005 Hardee Place		Amount of Each Receipt this Period 40.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	

Full Name (Last, First, Middle Initial) B. Mr Matthew Wayne Elrod		Date of Receipt 10 / 04 / 2011 Transaction ID : 42260228
Mailing Address 4782 Farndon Ct		Amount of Each Receipt this Period 20.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) C. Karen Jost		Date of Receipt 10 / 04 / 2011 Transaction ID : 42260229
Mailing Address 400 Madison St Apt 805		Amount of Each Receipt this Period 40.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 60
	<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 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 ▼ 235.00

Date of Receipt 10 / 04 / 2011
Transaction ID : 42260230

Amount of Each Receipt this Period 21.00

B. Dr John Steven Halle
Full Name (Last, First, Middle Initial)

Mailing Address 823 Coxboro Dr

City Brentwood State TN Zip Code 37027-7476

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

Name of Employer Belmont University Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2011
Transaction ID : 42260260

Amount of Each Receipt this Period 250.00

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

Mailing Address 1200 Se 13th Ter

City Fort Lauderdale State FL Zip Code 33316-2104

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 ▼ 240.00

Date of Receipt 10 / 03 / 2011
Transaction ID : 42260393

Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional).....▶	391.00
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 60
	<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. Herman L. Triezenberg		Date of Receipt 10 / 06 / 2011 Transaction ID : 42260622
Mailing Address 1021 Glen Ave		Amount of Each Receipt this Period 500.00
City Mount Pleasant	State MI	Zip Code 48858-3745
FEC ID number of contributing federal political committee. C	Name of Employer Central Michigan University	
Occupation PT		Aggregate Year-to-Date 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Andreia D. Nebel		Date of Receipt 10 / 04 / 2011 Transaction ID : 42260638
Mailing Address 7317 S 166th St		Amount of Each Receipt this Period 250.00
City Omaha	State NE	Zip Code 68136-3060
FEC ID number of contributing federal political committee. C	Name of Employer Clarkson College	
Occupation PT		Aggregate Year-to-Date 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jane Eason		Date of Receipt 10 / 04 / 2011 Transaction ID : 42260639
Mailing Address 4725 Hastings St		Amount of Each Receipt this Period 250.00
City Metairie	State LA	Zip Code 70006-2706
FEC ID number of contributing federal political committee. C	Name of Employer LSUHSC	
Occupation PT		Aggregate Year-to-Date 260.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 11 OF 60
	<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. Denise J Wise
Full Name (Last, First, Middle Initial)
Mailing Address 3618 Allendale Ave
City Duluth State MN Zip Code 55803-1829
FEC ID number of contributing federal political committee. **C**
Name of Employer College of St. Scholastica Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42260648
Amount of Each Receipt this Period
250.00

B. Dr Barbara A. Tschoepe
Full Name (Last, First, Middle Initial)
Mailing Address 965 Saratoga Ct
City Boulder State CO Zip Code 80303-3233
FEC ID number of contributing federal political committee. **C**
Name of Employer Regis University Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42260655
Amount of Each Receipt this Period
100.00

C. Wanda Brown Nitsch
Full Name (Last, First, Middle Initial)
Mailing Address 700 Windy Point Dr
City San Marcos State CA Zip Code 92069-1701
FEC ID number of contributing federal political committee. **C**
Name of Employer University of St Augustine Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42260656
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 12 OF 60
	<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. Linda J Tsoumas EdD
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Allen Rd
 City Belchertown State MA Zip Code 01007-9549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MCPHS Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 06 / 2011
Transaction ID : 42260659
 Amount of Each Receipt this Period 250.00

B. Dr Patricia Downey
 Full Name (Last, First, Middle Initial)
 Mailing Address 328 Castlegate Rd
 City Pittsburgh State PA Zip Code 15221-4418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chatham University Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2011
Transaction ID : 42260875
 Amount of Each Receipt this Period 250.00

C. Dr Deborah Lynn Givens
 Full Name (Last, First, Middle Initial)
 Mailing Address 4845 S 155th Ct
 City Omaha State NE Zip Code 68137-5048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Ohio State University Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2011
Transaction ID : 42260887
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 60		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

A. Neva F. Greenwald
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 4823
 City Jackson State MS Zip Code 39296-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Mississippi Medical Cent Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 06 / 2011**
Transaction ID : 42260893
 Amount of Each Receipt this Period **100.00**

B. Dr Mary M Rodgers
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Penn St University Of Maryland
 City Baltimore State MD Zip Code 21201-1082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Maryland Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt **10 / 06 / 2011**
Transaction ID : 42260894
 Amount of Each Receipt this Period **500.00**

C. Corrie Odom
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 W Main St Ste A210
 City Durham State NC Zip Code 27705-1108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Duke University Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 06 / 2011**
Transaction ID : 42260948
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional).....▶	700.00
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 60
	<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 David M. Morris
Full Name (Last, First, Middle Initial)

Mailing Address 908 57th St S

City Birmingham State AL Zip Code 35212-4022

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

Name of Employer Univ of Alabama at Birmingham Occupation PT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2011
Transaction ID : 42261092

Amount of Each Receipt this Period 250.00

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 ▼ 450.00

Date of Receipt 10 / 06 / 2011
Transaction ID : 42261560

Amount of Each Receipt this Period 50.00

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 10 / 06 / 2011
Transaction ID : 42261566

Amount of Each Receipt this Period 100.00

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 15 OF 60
	<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)

Full Name (Last, First, Middle Initial)
A. Cindy Furey

Mailing Address 5677 Oberlin Dr Ste 106

City	State	Zip Code
San Diego	CA	92121-1741

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

Name of Employer	Occupation
Comprehensive Therapy Services	PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2011

Transaction ID : 42261731

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Mr Jeffrey Thomas Hamilton

Mailing Address 12234 Cottonwood Rd

City	State	Zip Code
Cottonwood	AL	36320-4279

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 ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2011

Transaction ID : 42261977

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Cathleen M. Tarro

Mailing Address 8301 44th St W

City	State	Zip Code
University Place	WA	98466-2305

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

Name of Employer	Occupation
Self-Employed	PTA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2011

Transaction ID : 42262233

Amount of Each Receipt this Period
 45.00

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 60
	<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. Amy Lynn Rohsner
Full Name (Last, First, Middle Initial)

Mailing Address 9312 Roxanna Dr

City Austin State TX Zip Code 78748-6040

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 ▼ 225.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42262580

Amount of Each Receipt this Period
25.00

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

Mailing Address 800 Compton Rd Unit 3

City Cincinnati State OH Zip Code 45231-3846

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 ▼ 1400.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42262894

Amount of Each Receipt this Period
200.00

C. Dr Steven Lesh
Full Name (Last, First, Middle Initial)

Mailing Address 4636 S 150th Rd

City Bolivar State MO Zip Code 65613-7329

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

Name of Employer Southwest Baptist University Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42263378

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 17 OF 60
	<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. Brad A. Thuringer

Mailing Address 1010 17th Ave S

City State Zip Code
Brookings SD 57006-4099

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

Name of Employer Occupation
Lake Area Technical Institute PTA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2011
Transaction ID : 42263934

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms Florence Thillet-Bice

Mailing Address 7122 Laguna Villas

City State Zip Code
Houston TX 77036-4395

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

Name of Employer Occupation
Pediatric Therapy Services 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
10 / 06 / 2011
Transaction ID : 42264523

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
c. Mr Raymond C. Menhard

Mailing Address 160 Lilac Ln

City State Zip Code
Greenville MS 38701-7319

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 ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2011
Transaction ID : 42265328

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 60
	<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 Jennifer Mahler Gamboa
 Full Name (Last, First, Middle Initial)
 Mailing Address 865 N Nottingham St
 City Arlington State VA Zip Code 22205-1510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Body Dynamics Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.06**

Date of Receipt **10 / 06 / 2011**
Transaction ID : 42265566
 Amount of Each Receipt this Period **83.34**

B. Ms Jennifer Ann Lesko
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 2nd Ave W Apt 205
 City Seattle State WA Zip Code 98119-3771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Therapeutic Associates Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **385.00**

Date of Receipt **10 / 06 / 2011**
Transaction ID : 42287884
 Amount of Each Receipt this Period **50.00**

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 **400.00**

Date of Receipt **10 / 13 / 2011**
Transaction ID : 42288072
 Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional).....▶	183.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 60
	<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. Eva Norman
Full Name (Last, First, Middle Initial)

Mailing Address 11144 Hillsboro Ave N

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
10 / 06 / 2011
Transaction ID : 42288597

Amount of Each Receipt this Period
50.00

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

Mailing Address 1011 W Penn Ave

City Robesonia State PA Zip Code 19551-9550

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

Name of Employer Western Berks PT Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 05 / 2011
Transaction ID : 42321144

Amount of Each Receipt this Period
250.00

C. Kelly Chaplin Shinall
Full Name (Last, First, Middle Initial)

Mailing Address 507 Cumberland Pl

City Oxford State MS Zip Code 38655-9300

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

Name of Employer Cornerstone Rehab of Oxford Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 11 / 2011
Transaction ID : 42405330

Amount of Each Receipt this Period
100.00

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 20 OF 60
	<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. 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
10 / 13 / 2011
Transaction ID : 42412535

Amount of Each Receipt this Period
208.33

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

Mailing Address 10557 Church Rd

City Dallas State TX Zip Code 75238-2269

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

Name of Employer Firra Therapeutics Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 13 / 2011
Transaction ID : 42412659

Amount of Each Receipt this Period
250.00

C. Mr Frank C. Fantazzi
Full Name (Last, First, Middle Initial)

Mailing Address 4720 Lincrest Dr

City Brookfield State WI Zip Code 53045-1123

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

Name of Employer PT Plus Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
10 / 11 / 2011
Transaction ID : 42412660

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 658.33

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

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

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

FOR LINE NUMBER: PAGE 21 OF 60
(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. Stephanie Riley

Mailing Address 330 Hawser Ln

City State Zip Code
 Naples FL 34102-5031

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
 10 / 11 / 2011
Transaction ID : 42412661

Amount of Each Receipt this Period
 250.00

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 ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2011
Transaction ID : 42412662

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
c. Dr Cynthia C. Zadai

Mailing Address 4 S Meadow Rdg

City State Zip Code
 Concord MA 01742-3000

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

Name of Employer Occupation
 MGHIHP PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2011
Transaction ID : 42418005

Amount of Each Receipt this Period
 100.00

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 60
	<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 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 ▼ 835.00

Date of Receipt 10 / 13 / 2011
Transaction ID : 42418006
 Amount of Each Receipt this Period 100.00

B. Ms Beth Whitehead
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 37
 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 ▼ 2450.00

Date of Receipt 10 / 13 / 2011
Transaction ID : 42418007
 Amount of Each Receipt this Period 250.00

C. Dr Daniel Maddox
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 Watford Gln
 City Lawrenceville State GA Zip Code 30043-3078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Select Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 10 / 13 / 2011
Transaction ID : 42418008
 Amount of Each Receipt this Period 25.00

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 23 OF 60
	<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 Lynda D. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 850 Road 5
 City Powell State WY Zip Code 82435-8422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advantage Rehab Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt **10 / 13 / 2011**
Transaction ID : 42418009
 Amount of Each Receipt this Period **100.00**

B. Mr Peter J. McMenam
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 N Garland Ct Apt 3805
 City Chicago State IL Zip Code 60602-4836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwestern University Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2150.00**

Date of Receipt **10 / 13 / 2011**
Transaction ID : 42418010
 Amount of Each Receipt this Period **250.00**

C. Laurie Jean Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 Hartley Pl
 City Duluth State MN Zip Code 55803-2473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Workwell Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **450.00**

Date of Receipt **10 / 13 / 2011**
Transaction ID : 42418014
 Amount of Each Receipt this Period **50.00**

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 24 OF 60
	<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. Debra Carpenter
 Full Name (Last, First, Middle Initial)
 Mailing Address 772 Ne Mount Mystery Loop
 City Poulsbo State WA Zip Code 98370-8022
 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
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2011
Transaction ID : 42420421
 Amount of Each Receipt this Period
150.00

B. Susan Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address 6132 Los Fuentes Dr
 City El Paso State TX Zip Code 79912-6656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Providence Medical Center 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
 10 / 11 / 2011
Transaction ID : 42420428
 Amount of Each Receipt this Period
250.00

C. Dr Laurie P. Hurst
 Full Name (Last, First, Middle Initial)
 Mailing Address 319 W Lakewood St
 City Nacogdoches State TX Zip Code 75965-2420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nacogdoches Medical Center 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
 10 / 12 / 2011
Transaction ID : 42425757
 Amount of Each Receipt this Period
250.00

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 25 OF 60
	<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. Mark Lukert
 Full Name (Last, First, Middle Initial)
 Mailing Address 23514 Nw 122nd Ave
 City Alachua State FL Zip Code 32615-7832
 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 **10 / 12 / 2011**
Transaction ID : 42425767
 Amount of Each Receipt this Period **500.00**

B. Sarah Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Professional Blvd
 City Daytona Beach State FL Zip Code 32114-3840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Thomas Orthopedic & Sports Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 12 / 2011**
Transaction ID : 42425779
 Amount of Each Receipt this Period **250.00**

C. Mr Ronald Lyn Joyner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2536 70th Ave S
 City Saint Petersburg State FL Zip Code 33712-5637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Joyner Rehab Center Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 20 / 2011**
Transaction ID : 42425793
 Amount of Each Receipt this Period **200.00**

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 60
	<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. 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2011
Transaction ID : 42425808
 Amount of Each Receipt this Period
 500.00

B. Steven Kenneth Korthuis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1824 Front St Ste A
 City Lynden State WA Zip Code 98264-1729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lynden Family 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
 10 / 14 / 2011
Transaction ID : 42425811
 Amount of Each Receipt this Period
 500.00

C. Gary Vande Kamp
 Full Name (Last, First, Middle Initial)
 Mailing Address 707 Terrace Dr
 City Clinton State IA Zip Code 52732-5418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clinton PT Services Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2011
Transaction ID : 42456899
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 27 OF 60
(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. Mary Jane Harris

Mailing Address 6500 Langleigh Way

City State Zip Code
 Alexandria VA 22315-3454

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 ▼
 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42457986

Amount of Each Receipt this Period
 45.00

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 ▼
 769.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42457987

Amount of Each Receipt this Period
 38.47

Full Name (Last, First, Middle Initial)
C. Kenneth Joseph Harwood

Mailing Address 12551 Manderley Way

City State Zip Code
 Herndon VA 20171-1828

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 ▼
 479.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42457989

Amount of Each Receipt this Period
 22.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 106.22

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 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American 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 ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42457993

Amount of Each Receipt this Period
40.00

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42457995

Amount of Each Receipt this Period
20.00

C. 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 ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42457996

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Ms Heather Lauren Smith		Date of Receipt
Mailing Address 2200 12th Ct N Apt 507		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
City	State	Zip Code
Arlington	VA	22201-6512
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : 42457997
APTA	PT	
Receipt For:		Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="21.00"/>
<input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial) B. Mrs Maisie Violet Chin		Date of Receipt
Mailing Address 5810 Wyndemere Ln		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
City	State	Zip Code
Stone Mountain	GA	30087-2529
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : 42458190
Soverign Rehabilitation of Cumming	PT	
Receipt For:		Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="50.00"/>
<input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial) C. Renee M Cottrell		Date of Receipt
Mailing Address 815 E 2nd St		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
City	State	Zip Code
Royal Oak	MI	48067-2840
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : 42458191
HC Solutions	PT	
Receipt For:		Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="250.00"/>
<input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="321.00"/>
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 30 OF 60
	<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 Laura Ann Schindler
 Full Name (Last, First, Middle Initial)
 Mailing Address Advanced Physical Therapy Solution
 501 Executive Pl
 City Fayetteville State NC Zip Code 28305-5390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advanced Physical Therapy Solutions Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 18 / 2011**
Transaction ID : 42535254
 Amount of Each Receipt this Period **100.00**

B. Joanne Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address 2545 Parker Trl
 City Gainesville State GA Zip Code 30506-1831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gainesville Physical Therapy Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 18 / 2011**
Transaction ID : 42535627
 Amount of Each Receipt this Period **250.00**

C. Ms Kathleen Ann Whooley
 Full Name (Last, First, Middle Initial)
 Mailing Address 2238 Midvale Ave
 City Los Angeles State CA Zip Code 90064-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Larchmont PT Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 17 / 2011**
Transaction ID : 42577228
 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 31 OF 60
	<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 ▼ 450.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599649

Amount of Each Receipt this Period 50.00

B. Anne W Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 124 Cherryfield Ln

City Savannah State GA Zip Code 31419-9095

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

Name of Employer Armstrong State University Occupation PT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.70

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599650

Amount of Each Receipt this Period 41.67

C. 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 ▼ 225.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599652

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 116.67

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 32 OF 60
	<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 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 ▼ 900.00

Date of Receipt
10 / 20 / 2011
Transaction ID : 42599653

Amount of Each Receipt this Period
100.00

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

Mailing Address 20 Orton Rd

City Painesville State OH Zip Code 44077-5142

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

Name of Employer Layton Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 20 / 2011
Transaction ID : 42599654

Amount of Each Receipt this Period
50.00

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 ▼ 250.00

Date of Receipt
10 / 20 / 2011
Transaction ID : 42599656

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 33 OF 60
	<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 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 **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2011
Transaction ID : 42599660
 Amount of Each Receipt this Period
50.00

B. 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 Assocaites 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
 10 / 20 / 2011
Transaction ID : 42599662
 Amount of Each Receipt this Period
50.00

C. Mr Warren Dean McCall
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 W Academy St
 City Williamston State NC Zip Code 27892-2060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Roanoke Therapeutic Services, Inc. Occupation PT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2011
Transaction ID : 42599663
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **150.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 60
	<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. 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 ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : 42599665

Amount of Each Receipt this Period
 100.00

B. 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : 42599667

Amount of Each Receipt this Period
 50.00

C. Dr Aimee B. Klein
Full Name (Last, First, Middle Initial)

Mailing Address 15 Boatswains Way

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : 42599669

Amount of Each Receipt this Period
 200.00

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 35 OF 60
	<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 Barbara Sanders
Full Name (Last, First, Middle Initial)
Mailing Address 6913 Nubian Ln
City Austin State TX Zip Code 78739-2203
FEC ID number of contributing federal political committee. **C**
Name of Employer Texas State University Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599671
Amount of Each Receipt this Period 50.00

B. Linda E Arslanian
Full Name (Last, First, Middle Initial)
Mailing Address 230 Bray St
City Gloucester State MA Zip Code 01930-1551
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 ▼ 250.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599672
Amount of Each Receipt this Period 50.00

C. Mr Lawrence Charles Ohman
Full Name (Last, First, Middle Initial)
Mailing Address 498 Crestline Circle Dr
City Lewiston State ID Zip Code 83501-6701
FEC ID number of contributing federal political committee. **C**
Name of Employer Inst of PT and Fitness Occupation PT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599675
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 60
	<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. Kenneth Wayne Kirby Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 1177 Burnham Dr
 City Columbus State OH Zip Code 43228-7319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Orthopedics Specialists Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599676
 Amount of Each Receipt this Period 100.00

B. Pamela G. Unger
 Full Name (Last, First, Middle Initial)
 Mailing Address 443 Wentz St
 City Kutztown State PA Zip Code 19530-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cellfication Inc. Occupation PT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599680
 Amount of Each Receipt this Period 100.00

C. Elmer Platz
 Full Name (Last, First, Middle Initial)
 Mailing Address 418 Route 515
 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: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 10 / 20 / 2011
Transaction ID : 42599682
 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 37 OF 60
	<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 Rick Anthony Gawenda		Date of Receipt
Mailing Address 7913 Creek Bend Dr		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
City Ypsilanti State MI Zip Code 48197-6204		Transaction ID : 42599683
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Detroit Medical Center Occupation PT		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="835.00"/>

Full Name (Last, First, Middle Initial) B. Steven Cassabaum		Date of Receipt
Mailing Address 62944 Sunset Dr		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
City Nevada State IA Zip Code 50201-7947		Transaction ID : 42599685
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer 21st Century Rehab Occupation PT		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1750.00"/>

Full Name (Last, First, Middle Initial) C. Kathleen K. Mairella		Date of Receipt
Mailing Address 256 Whitford Ave		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
City Nutley State NJ Zip Code 07110-1820		Transaction ID : 42599686
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Self-Employed Occupation PT		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="800.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
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 38 OF 60
	<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. Mr David Lee Clegg
Full Name (Last, First, Middle Initial)

Mailing Address 21268 Little River Blvd

City Clinton Township State MI Zip Code 48036-1470

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

Name of Employer Clegg and Guest Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 / /
Transaction ID : 42599687

Amount of Each Receipt this Period

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

Mailing Address 917 Eagles Landing Pkwy

City Stockbridge State GA Zip Code 30281-5011

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 ▼ **835.00**

Date of Receipt
 / /
Transaction ID : 42599690

Amount of Each Receipt this Period

C. Paul A. 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 ▼ **600.00**

Date of Receipt
 / /
Transaction ID : 42599691

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="237.50"/>
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 39 OF 60
	<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. Gretchen Janet Wadewitz
Full Name (Last, First, Middle Initial)

Mailing Address 2509 N 47th St

City Milwaukee State WI Zip Code 53210-2928

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

Name of Employer Columbia-St. Mary's Hospital Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2011
Transaction ID : 42606677

Amount of Each Receipt this Period 100.00

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

Mailing Address 6036 Franklin Park Rd

City Mc Lean State VA Zip Code 22101-4211

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

Name of Employer AAFF Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 17 / 2011
Transaction ID : 42608503

Amount of Each Receipt this Period 500.00

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

Mailing Address 106 S Holmen Dr Suite #2

City Holmen State WI Zip Code 54636-9468

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

Name of Employer Achieve Solutions Inc. Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 19 / 2011
Transaction ID : 42608505

Amount of Each Receipt this Period 250.00

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 40 OF 60
	<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 Jeffrey Alan Waldron
 Full Name (Last, First, Middle Initial)
 Mailing Address 21009 76th Ave W Ste B
 City Edmonds State WA Zip Code 98026-7126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Axis 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
 10 / 24 / 2011
Transaction ID : 42622864
 Amount of Each Receipt this Period
 500.00

B. Mr Victor G. Vaughan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1732 Whitney Ave Apt 2
 City Hamden State CT Zip Code 06517-1925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sacred Heart University 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
 10 / 24 / 2011
Transaction ID : 42622867
 Amount of Each Receipt this Period
 250.00

c. Ms Jing-Ching Sally Ho
 Full Name (Last, First, Middle Initial)
 Mailing Address 4070 Deervale Dr
 City Sherman Oaks State CA Zip Code 91403-4609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ho 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
 10 / 27 / 2011
Transaction ID : 42622871
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Dr Todd Joseph Bourgeois		Date of Receipt 10 / 21 / 2011 Transaction ID : 42626897
Mailing Address 17 4th St Apt D		Amount of Each Receipt this Period 100.00
City Saint Augustine	State FL	Zip Code 32080-2805
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	
Occupation PT		Aggregate Year-to-Date 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Beth McKittrick-Bandy		Date of Receipt 10 / 27 / 2011 Transaction ID : 42638540
Mailing Address 822 Cartier Ln		Amount of Each Receipt this Period 50.00
City Little Rock	State AR	Zip Code 72211-5509
FEC ID number of contributing federal political committee. C	Name of Employer Arkansas Children's Hospital	
Occupation PT		Aggregate Year-to-Date 485.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Greg Joseph LeBlanc		Date of Receipt 10 / 27 / 2011 Transaction ID : 42638541
Mailing Address 16313 Spanish Ct		Amount of Each Receipt this Period 25.00
City Greenwell Springs	State LA	Zip Code 70739-5935
FEC ID number of contributing federal political committee. C	Name of Employer Baton Rouge Physical Therapy	
Occupation PT		Aggregate Year-to-Date 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 42 OF 60
(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. Chad M Novasic

Mailing Address 1823 Landre Ct

City Burlington State WI Zip Code 53105-7603

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

Name of Employer P.T. Plus Occupation PT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **10 / 27 / 2011**

Transaction ID : 42638542

Amount of Each Receipt this Period **100.00**

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

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 ▼ **450.00**

Date of Receipt **10 / 27 / 2011**

Transaction ID : 42638543

Amount of Each Receipt this Period **50.00**

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

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 ▼ **450.00**

Date of Receipt **10 / 27 / 2011**

Transaction ID : 42638544

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 43 OF 60
	<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 408 Taas Trl

City Mercer State PA Zip Code 16137-9350

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 ▼ 4500.00

Date of Receipt 10 / 27 / 2011
Transaction ID : 42638545

Amount of Each Receipt this Period 500.00

B. Dr Gina Lynne Pariser
Full Name (Last, First, Middle Initial)

Mailing Address 5319 Manor Ct

City Crestwood State KY Zip Code 40014-8845

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

Name of Employer Bellarmine University Occupation PT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 27 / 2011
Transaction ID : 42638547

Amount of Each Receipt this Period 25.00

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

Mailing Address 371 Noah Dr Ste 102

City Jasper State GA Zip Code 30143-8708

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

Name of Employer New Beginning Therapeutic Services Occupation PT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2011
Transaction ID : 42638548

Amount of Each Receipt this Period 50.00

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 44 OF 60
	<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 Lisa Kristine Saladin
Full Name (Last, First, Middle Initial)

Mailing Address 1325 Overcreek Ct

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2011

Transaction ID : 42638549

Amount of Each Receipt this Period
100.00

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

Mailing Address 2092 S State Route 123

City Lebanon State OH Zip Code 45036-9640

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 ▼ **335.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2011

Transaction ID : 42638553

Amount of Each Receipt this Period
50.00

C. Zubin Sam Tantra
Full Name (Last, First, Middle Initial)

Mailing Address 2426 Rfd

City Long Grove State IL Zip Code 60047-8306

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

Name of Employer Lake County Physical Therapy 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
10 / 27 / 2011

Transaction ID : 42638555

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 45 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Bobbie S. Hurt			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2011 Transaction ID : 42638561
Mailing Address 1810 Tremont St			Amount of Each Receipt this Period 100.00
City Galveston	State TX	Zip Code 77550-7904	
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 ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Mr Robert H. Clark II			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2011 Transaction ID : 42638563
Mailing Address 68 Mile Hill Rd S			Amount of Each Receipt this Period 100.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Dr David A. Pariser			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2011 Transaction ID : 42638564
Mailing Address 5319 Manor Ct			Amount of Each Receipt this Period 60.00
City Crestwood	State KY	Zip Code 40014-8845	
FEC ID number of contributing federal political committee. C			
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 ▼ 635.00		

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 60
	<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. Sheila K. Nicholson
Full Name (Last, First, Middle Initial)

Mailing Address 6143 Whimbrelwood Dr

City Lithia State FL Zip Code 33547-4101

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 ▼ 1000.00

Date of Receipt
10 / 27 / 2011
Transaction ID : 42638566

Amount of Each Receipt this Period
100.00

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

Mailing Address 402 Vista De La Playa Ln

City Santa Barbara State CA Zip Code 93109-1701

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

Name of Employer Human Performance Center Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
10 / 27 / 2011
Transaction ID : 42638571

Amount of Each Receipt this Period
250.00

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 ▼ 920.00

Date of Receipt
10 / 27 / 2011
Transaction ID : 42638572

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Ann Rugh
Full Name (Last, First, Middle Initial)

Mailing Address 92 Cold Spring Rd

City Coxsack State NY Zip Code 12051-2102

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
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 42639310

Amount of Each Receipt this Period
 250.00

B. John Kevin Cormier
Full Name (Last, First, Middle Initial)

Mailing Address 526 14th St

City Tuscaloosa State AL Zip Code 35401-3434

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

Name of Employer APTOR Rehab Services 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
 10 / 25 / 2011

Transaction ID : 42639473

Amount of Each Receipt this Period
 250.00

C. Mr Richard Jude Coury
Full Name (Last, First, Middle Initial)

Mailing Address 1659 N Klamath Pl

City Orange State CA Zip Code 92867-3252

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

Name of Employer CB Physical Therapy Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : 42639476

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 60
	<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 Terry A. Faber		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2011 Transaction ID : 42640430
Mailing Address 129 Avon Dr		Amount of Each Receipt this Period 500.00
City Butler	State PA	Zip Code 16001-2728
FEC ID number of contributing federal political committee. C	Name of Employer Butler Physical Therapy	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr Robert James Seton		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011 Transaction ID : 42667235
Mailing Address 1950 Bluewater Blvd Ste 101		Amount of Each Receipt this Period 500.00
City Niceville	State FL	Zip Code 32578-3888
FEC ID number of contributing federal political committee. C	Name of Employer Orthopedic & Sports Phy Therapy Ctr	Occupation PT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Charles E St Vincent		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2011 Transaction ID : 42667291
Mailing Address 15 Chuparrosa Dr		Amount of Each Receipt this Period 250.00
City San Luis Obispo	State CA	Zip Code 93401-7411
FEC ID number of contributing federal political committee. C	Name of Employer SSORC	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).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 60
	<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. Mr Frank Richard Pinto Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 Aubrey Dr
 City State Zip Code
 Butler PA 16001-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Butler Physical Therapy Associates 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
 10 / 31 / 2011
Transaction ID : 42813363
 Amount of Each Receipt this Period
 300.00

B. Ms Nancy Louise Reynolds
 Full Name (Last, First, Middle Initial)
 Mailing Address 2502 Sevier St
 City State Zip Code
 Durham NC 27705-5819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Reynolds Physical Therapy 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
 10 / 31 / 2011
Transaction ID : 42813371
 Amount of Each Receipt this Period
 375.00

C. Ms Barbara Ann Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2724 Ne 53rd St
 City State Zip Code
 Seattle WA 98105-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Group Health Cooperative 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
 10 / 26 / 2011
Transaction ID : 42829734
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	925.00
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 50 OF 60
	<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. Susan Clarke
Full Name (Last, First, Middle Initial)

Mailing Address 6132 Los Fuentes Dr

City El Paso State TX Zip Code 79912-6656

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

Name of Employer Providence Medical Center 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
 10 / 28 / 2011
Transaction ID : 42829742

Amount of Each Receipt this Period
 100.00

B. Ms Janet L. Downey
Full Name (Last, First, Middle Initial)

Mailing Address 4585 Lancaster Dr

City Clarkston State MI Zip Code 48348-3657

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

Name of Employer Hurley Medical Center Occupation PT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2011
Transaction ID : 42829746

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1935 Lake Circle Dr E

City Saginaw State MI Zip Code 48609-9476

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

Name of Employer Covenant Healthcare 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
 10 / 31 / 2011
Transaction ID : 42829751

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
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 51 OF 60
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 Charles Ernest Line
Full Name (Last, First, Middle Initial)
Mailing Address 17441 Walnut St
City Yorba Linda State CA Zip Code 92886-1826
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 **210.00**

Date of Receipt **10 / 31 / 2011**
Transaction ID : 42829757
Amount of Each Receipt this Period **210.00**

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	22330.28

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 60
<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		Date of Receipt
Mailing Address Old Town Branch King Street		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Alexandria	State VA	<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
Zip Code 22314		Transaction ID : 42983058
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text" value="54.37"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="859.01"/>	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="54.37"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="54.37"/>

**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. Ben Cardin For Senate

Mailing Address P.O. Box 21093

City State Zip Code
Catonsville MD 21228

Purpose of Disbursement

011

Candidate Name

Mr. Benjamin Cardin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2011

Transaction ID : 42626965

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Rodney Alexander For Congress Inc.

Mailing Address 319 Nancy'S Road

City State Zip Code
Quitman LA 71268

Purpose of Disbursement

011

Candidate Name

Mr. Rodney Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: LA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2011

Transaction ID : 42626966

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Bob Goodlatte For Congress Committee

Mailing Address P.O. Box 292

City State Zip Code
Roanoke VA 24002

Purpose of Disbursement

011

Candidate Name

Rep. Robert Goodlatte

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2011

Transaction ID : 42626967

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

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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. Lucille Roybal-Allard For Congress

Mailing Address 6 E Street, Se

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Ms. Lucille Roybal-Allard

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 33

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2011

Transaction ID : 42626968

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Latourette For Congress Committee

Mailing Address 320 Kenarden Dr.

City Highland Hts. State OH Zip Code 44143

Purpose of Disbursement

011

Candidate Name

Rep. Steven C. LaTourette

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: OH District: 14

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2011

Transaction ID : 42626969

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lou Barletta For Congress

Mailing Address P.O. Box 128

City Hazleton State PA Zip Code 18201

Purpose of Disbursement

011

Candidate Name

Rep. Lou Barletta

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: PA District: 11

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2011

Transaction ID : 42626970

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. Dan 10

Mailing Address 1088 Bishop Street Suite 1009

City Honolulu State HI Zip Code 96813

Purpose of Disbursement

011

Candidate Name

Sen. Daniel K. Inouye

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626971

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lofgren For Congress

Mailing Address 123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement

011

Candidate Name

Ms. Zoe Lofgren

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626972

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Anna Eshoo For Congress

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

011

Candidate Name

Ms. Anna Eshoo

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626973

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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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. Citizens For Harkin

Mailing Address P O Box 811

City Des Moines State IA Zip Code 50304

Purpose of Disbursement

011

Candidate Name

Mr. Thomas Harkin

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: IA District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2011

Transaction ID : 42626974

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Committee To Re-Elect Henry Hank Johnson

Mailing Address 4262 Clausell Court Suite A

City Decatur State GA Zip Code 30035

Purpose of Disbursement

011

Candidate Name

Rep. Henry Johnson Jr.

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: GA District: 04

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2011

Transaction ID : 42626975

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Maloney For Congress

Mailing Address 49 East 92nd Street

City New York State NY Zip Code 10128

Purpose of Disbursement

011

Candidate Name

Ms. Carolyn Maloney

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: NY District: 14

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2011

Transaction ID : 42626976

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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)

Full Name (Last, First, Middle Initial)

A. Jon Runyan For Congress, Inc

Mailing Address PO Box 225

City State Zip Code
Colonia NJ 07067

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Jon Runyan

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2011

Transaction ID : 42626977

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. 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 Y
10		24		2011

Transaction ID : 42626978

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Levin For Congress

Mailing Address PO Box 37

City State Zip Code
Roseville MI 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 Y
10		24		2011

Transaction ID : 42626979

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. Steve Israel For Congress Committee

Mailing Address PO Box 777

City State Zip Code
Deer Park NY 11729

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Steve Israel

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626980

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrow

Mailing Address PO Box 8166

City State Zip Code
Savannah GA 31412

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. John Barrow

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626981

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Pete King For Congress Committee

Mailing Address PO Box 1428

City State Zip Code
Seaford NY 11783

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Peter King

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2011

Transaction ID : 42626982

Amount of Each Disbursement this Period

1000.00

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

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

3500.00

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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. Paul Tonko For Congress

Mailing Address 911 Central Avenue
PO Box 221

City Albany State NY Zip Code 12206

Purpose of Disbursement

011

Candidate Name

Rep. Paul David Tonko

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2011

Transaction ID : 42626983

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mark Critz For Congress Committee

Mailing Address 647 Main Street
Suite 110

City Johnstown State PA Zip Code 15901

Purpose of Disbursement

011

Candidate Name

Rep. Mark Critz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2011

Transaction ID : 42626984

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Higgins For Congress

Mailing Address PO Box 28

City Buffalo State NY Zip Code 14220

Purpose of Disbursement

011

Candidate Name

Rep. Brian M. Higgins

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2011

Transaction ID : 42626985

Amount of Each Disbursement this Period

1000.00

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

3500.00

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. Tim Walz For Us Congress

Mailing Address PO Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement

011

Candidate Name

Rep. Timothy J. Walz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2011			

Transaction ID : 42626986

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Kissell For Congress

Mailing Address P.O. Box 1530

City Biscoe State NC Zip Code 27209

Purpose of Disbursement

011

Candidate Name

Mr. Larry Kissell

Category/
Type

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
10			25			2011			

Transaction ID : 42626987

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Hatch Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement

011

Candidate Name

Mr. Orrin Hatch

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: UT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2011			

Transaction ID : 42626988

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)..... ▶

28500.00
