

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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="2015"/>	<input type="text" value="94125.67"/>	<input type="text" value="94125.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="216765.28"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15266.90"/>	<input type="text" value="570298.98"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="232032.18"/>	<input type="text" value="664424.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="83764.24"/>	<input type="text" value="516156.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="148267.94"/>	<input type="text" value="148267.94"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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).....	10609.32	530066.74
(ii) Unitemized	2157.58	37732.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12766.90	567798.98
(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)	12766.90	567798.98
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.....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15266.90	570298.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15266.90	570298.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	764.24	13156.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	764.24	13156.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	83000.00	485500.00
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	2500.03
(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	2500.03
29. Other Disbursements	0.00	15000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	83764.24	516156.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	83764.24	516156.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12766.90	567798.98
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.03
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12766.90	565298.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	764.24	13156.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	764.24	13156.68

**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 30
<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Brian Berman
Full Name (Last, First, Middle Initial)

Mailing Address 1541 W 22nd St

City Miami Beach State FL Zip Code 33140-4510

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

Name of Employer Brian Berman, MD, PhD, PA Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 07 / 14 / 2015
Transaction ID : E96C343E-3A6E-47D0-

Amount of Each Receipt this Period 251.00

B. Clarence William Brown Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 171 W Goethe St

City Chicago State IL Zip Code 60610-1914

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

Name of Employer St. Joseph Dermatology Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 15 / 2015
Transaction ID : FF53DE0A7F8551E86E2

Amount of Each Receipt this Period 100.00

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

Mailing Address 805 Riverside Dr

City Old Hickory State TN Zip Code 37138-3148

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

Name of Employer Rivergate Dermatology, PLLC Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 04 / 2015
Transaction ID : 42ACB36B3D7473688665

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 401.00

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 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Clay J. Cockerell
Full Name (Last, First, Middle Initial)
Mailing Address 4312 Arcady Ave
City Dallas State TX Zip Code 75205-3704
FEC ID number of contributing federal political committee. **C**
Name of Employer Cockerell Dermatopathology Occupation Dermatologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2916.62

Date of Receipt 07 / 15 / 2015
Transaction ID : DBE4956FF766B90153A
Amount of Each Receipt this Period 416.66

B. Brett M. Coldiron
Full Name (Last, First, Middle Initial)
Mailing Address 1105 River Hill Dr
City Covington State KY Zip Code 41011-1123
FEC ID number of contributing federal political committee. **C**
Name of Employer The Skin Cancer Center Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2916.62

Date of Receipt 07 / 15 / 2015
Transaction ID : 83636B8F46110CDD211
Amount of Each Receipt this Period 416.66

C. David Andrew Cowan
Full Name (Last, First, Middle Initial)
Mailing Address 1283 Beechwood Blvd
City Pittsburgh State PA Zip Code 15206-4542
FEC ID number of contributing federal political committee. **C**
Name of Employer BHS Dermatology Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 16 / 2015
Transaction ID : EAB010CC91A16DA563A
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1033.32
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Renuka Diwan
 Full Name (Last, First, Middle Initial)
 Mailing Address 29101 Health Campus Dr
 Building 2, Ste 300
 City Westlake State OH Zip Code 44145-5267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Laser & Skin Surgery Center Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **07 / 15 / 2015**
Transaction ID : 605A1CB7-5ED3-46A4-
 Amount of Each Receipt this Period **1000.00**

B. Barbara Greenan
 Full Name (Last, First, Middle Initial)
 Mailing Address 9418 Balfour Drive
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Academy Of Dermatology Occupation Association Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **505.00**

Date of Receipt **07 / 15 / 2015**
Transaction ID : 3E6DD9695884507E2F9
 Amount of Each Receipt this Period **45.00**

C. David T. Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 Kellsworth Way
 City Tyrone State GA Zip Code 30290-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Surgical & Cosmetic Dermatology, PC Occupation Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **291.69**

Date of Receipt **07 / 11 / 2015**
Transaction ID : 4B2BAB9DF73DCF209886
 Amount of Each Receipt this Period **41.67**

SUBTOTAL of Receipts This Page (optional).....	1086.67
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 9 OF 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Yolanda Rosi Helfrich
 Full Name (Last, First, Middle Initial)
 Mailing Address 3100 Pittsview Dr
 City Ann Arbor State MI Zip Code 48108-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ of Michigan, Dermatology Occupation Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 03 / 2015
Transaction ID : 4D5EA22841D52CFC71BA
 Amount of Each Receipt this Period 50.00

B. Stephen Chia-Jen Ho
 Full Name (Last, First, Middle Initial)
 Mailing Address 6535 S Adams Ct
 City Centennial State CO Zip Code 80121-3610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer About Skin Dermatology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 03 / 2015
Transaction ID : 5297BA11-AB3F-4E3A-
 Amount of Each Receipt this Period 300.00

C. Brian T. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3930 Executive Dr
 City Palm Harbor State FL Zip Code 34685-1024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Trinity Dermatology and Aesthetic Cent Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 16 / 2015
Transaction ID : 0A8162793F7CA9962C0
 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 10 OF 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Helen Y. Kim-James
Full Name (Last, First, Middle Initial)

Mailing Address 100 Chesterfield Business Pkwy
Ste 110

City Chesterfield State MO Zip Code 63005-1271

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

Name of Employer Chesterfield Valley Dermatology, PC Occupation Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 07 / 2015
Transaction ID : 45E0BE19F863C6D860BB

Amount of Each Receipt this Period
50.00

B. Hazle Smith Konerding
Full Name (Last, First, Middle Initial)

Mailing Address 205 Cyril Ln

City Richmond State VA Zip Code 23229-7740

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

Name of Employer Commonwealth Dermatology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2916.69

Date of Receipt
07 / 15 / 2015
Transaction ID : BD41EBD3B831578073D

Amount of Each Receipt this Period
416.67

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

Mailing Address 20 Fairbanks Blvd

City Woodbury State NY Zip Code 11797-2619

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

Name of Employer Self Employed Occupation Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
07 / 27 / 2015
Transaction ID : 4081B14D1929034F4BA1

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 516.67

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 11 OF 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Donn Alan Latour
Full Name (Last, First, Middle Initial)

Mailing Address 7100 Trappers Rdg

City State Zip Code
Battle Creek MI 49014-7591

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

Name of Employer Occupation
Dermatology and Skin Surgery Center Physician

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
07 / 13 / 2015

Transaction ID : 6ECA7F09570E0EAF89F

Amount of Each Receipt this Period
1000.00

B. Elizabeth Shannon Martin
Full Name (Last, First, Middle Initial)

Mailing Address 861 Tulip Poplar Dr

City State Zip Code
Hoover AL 35244-1639

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

Name of Employer Occupation
Pure Dermatology & Aesthetics, PC Dermatologist

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
07 / 16 / 2015

Transaction ID : 032A317B1F9DDE16B03

Amount of Each Receipt this Period
100.00

c. Charity Foster McConnell
Full Name (Last, First, Middle Initial)

Mailing Address 308 Granny White Pike

City State Zip Code
Brentwood TN 37027-5754

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

Name of Employer Occupation
Franklin Dermatology Group, PLC Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2015

Transaction ID : 48A5BB3B96E99CB17A7D

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Alvin Henry Meyer Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5651 Frist Blvd
 Ste 509
 City Hermitage State TN Zip Code 37076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation Physician
 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
 07 / 09 / 2015
Transaction ID : B1B999BC694C30BB3C1
 Amount of Each Receipt this Period
500.00

B. Steven Earl Musick
 Full Name (Last, First, Middle Initial)
 Mailing Address 9444 Caddyshack Cir
 City Saint Louis State MO Zip Code 63127-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Musick Dermatology, LLC
 Occupation Dermatologist
 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
 07 / 14 / 2015
Transaction ID : 3872F614C71F6363DE1
 Amount of Each Receipt this Period
250.00

C. Peter J. Neidenbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 Club Pointe Dr
 City Spartanburg State SC Zip Code 29302-6313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advance Dermatology
 Occupation Physician
 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
 07 / 21 / 2015
Transaction ID : 781EE9ABD6CDF0B8A09
 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 13 OF 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Sabrina Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4505 Silver Wing Ct
 City Castle Rock State CO Zip Code 80108-8319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advanced Dermatology Occupation Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **255.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2015
Transaction ID : 36DA4838-D765-4081-
 Amount of Each Receipt this Period
255.00

B. Christine Poblete-Lopez
 Full Name (Last, First, Middle Initial)
 Mailing Address 37827 Briar Lakes Dr
 City Avon State OH Zip Code 44011-2190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cleveland Clinic Foundation Occupation Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2015
Transaction ID : 0E8386A336BCE8A85D5
 Amount of Each Receipt this Period
100.00

C. Beth Rigel
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E 85th St Apt 1604
 City New York State NY Zip Code 10028-4594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2015
Transaction ID : E7B3D31894E4B31EC11
 Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....	2355.00
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 30
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Karl W. Siebe
 Full Name (Last, First, Middle Initial)
 Mailing Address 11618 Woods Bay Ln
 City Indianapolis State IN Zip Code 46236-8367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dermatology of Noblesville Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2015
Transaction ID : D5F2CAD622326D7131F
 Amount of Each Receipt this Period 250.00

B. Daniel M. Siegel
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Hitherbrook Rd
 City Saint James State NY Zip Code 11780-1014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Long Island Skin Cancer And Dermatolog Occupation Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2916.62

Date of Receipt 07 / 15 / 2015
Transaction ID : EDA68809FF1C02A22F7
 Amount of Each Receipt this Period 416.66

C. Peter Wynhoven Simoneaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 1514 Jefferson Hwy Department of Dermatology
 City New Orleans State LA Zip Code 70121-2429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ochsner Clinic Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 03 / 2015
Transaction ID : 2C1F5170-EDBB-4106-
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1166.66
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Dwight R. Tribelhorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1085 Kristen Dr
 City Medford State OR Zip Code 97504-8516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dermatology Assocs of Medford Occupation Physician
 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
 07 / 28 / 2015
Transaction ID : F39132BB73751FEB524
 Amount of Each Receipt this Period
 250.00

B. George R. Woodbury Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2118 Kirby Rd
 City Memphis State TN Zip Code 38119-5510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rheumatology and Dermatology Associate Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : 291C925F130E1E37F78
 Amount of Each Receipt this Period
 250.00

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	10609.32

**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 30
<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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Friends for Harry Reid
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 19163
City Las Vegas State NV Zip Code 89132
FEC ID number of contributing federal political committee. **C** C00204370
Name of Employer Occupation
Receipt For: 2016
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2015
Transaction ID : 4F882765B88596C9CC2
Amount of Each Receipt this Period
2500.00
Refund

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Amex Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2015

Transaction ID : V6DFCC69E3506A0E41A2

Amount of Each Disbursement this Period

325.32

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
VS/MC Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2015

Transaction ID : VAC58EF432DDAC05C18D

Amount of Each Disbursement this Period

438.92

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

764.24

764.24

**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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. BADGERPAC

Mailing Address PO Box 184

City La Crosse State WI Zip Code 54602

Purpose of Disbursement
2015 Contribution

011

Candidate Name

BADGERPAC

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : AD3BD938D0C978E427A

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Becerra for Congress

Mailing Address PO Box 71584

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
2016 Primary

011

Candidate Name

Xavier Becerra

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: CA District: 34

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : 926DAB13BBB44B66C8D

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Bilirakis for Congress

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement
2016 Primary

011

Candidate Name

Gus Michael Bilirakis

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: FL District: 12

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : 2B01688A67DCC42BE4B

Amount of Each Disbursement this Period

1500.00

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

5000.00

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Bucshon for Congress

Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement
2016 Primary

011
Category/
Type

Candidate Name

Larry Dean Bucshon

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 08

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : B5025A25DA6A545A6C1

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Collins for Congress

Mailing Address PO Box 386

City Clarence State NY Zip Code 14031-0386

Purpose of Disbursement
2016 Primary

011
Category/
Type

Candidate Name

Christopher Carl Collins

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 27

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : C796384DB485D48D949

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Continuing America's Strength and Security PAC

Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement
2015 Contribution

011
Category/
Type

Candidate Name

Continuing America's Strength and Security PAC

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : DC7572AE355EB94B2B0

Amount of Each Disbursement this Period

2500.00

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

4500.00

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Diane Black for Congress

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066-1437

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Diane Lynn Black

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : 2A9D60EBB79201026AA

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Dr Brian Babin for Congress

Mailing Address PO Box 159

City Woodville State TX Zip Code 75979

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Brian Babin

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 36

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : 361BF6551F1C44A8D9F

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Fightin' Ninth Political Action Committee

Mailing Address PO Box 71596

City Richmond State VA Zip Code 23255-1596

Purpose of Disbursement
2015 Contribution

011

Category/
Type

Candidate Name

Fightin' Ninth Political Action Committee

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : 55C0E3F10E951570B02

Amount of Each Disbursement this Period

2500.00

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

5000.00

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Bill Posey

Mailing Address PO Box 411486

City Melbourne State FL Zip Code 32941

Purpose of Disbursement
2016 Primary

011

Candidate Name

William Posey

Category/
Type

Office Sought: House
 Senate
 President
State: FL District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : 86663D6E97AF9C084D6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Jim Clyburn

Mailing Address Post Office Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement
2016 Primary

011

Candidate Name

James E. Clyburn

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : 1DF8EDF65438248FFF8

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of John Thune

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
2016 Primary

011

Candidate Name

John Randolph Thune

Category/
Type

Office Sought: House
 Senate
 President
State: SD District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : DFA048ED2028FFB4196

Amount of Each Disbursement this Period

2500.00

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Michelle

Mailing Address PO Box 25422

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2016 Primary

011

Candidate Name
Michelle Lujan Grisham

Category/
Type

Office Sought: House
 Senate
 President
State: NM District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : 6FADCAA3D4860CFB9A8

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Friends of Rosa DeLauro

Mailing Address 129 Church St, Ste 818

City New Haven State CT Zip Code 06510

Purpose of Disbursement
2016 Primary

011

Candidate Name
Rosa L. DeLauro

Category/
Type

Office Sought: House
 Senate
 President
State: CT District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2015

Transaction ID : 79A51B310506CFF0D60

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends of Todd Young, Inc.

Mailing Address PO Box 1053

City Bloomington State IN Zip Code 47402

Purpose of Disbursement
2016 Primary

011

Candidate Name
Todd Christopher Young

Category/
Type

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2015

Transaction ID : C023FABFFE947953097

Amount of Each Disbursement this Period

5000.00

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

8500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Hoyer for Congress

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2016 Primary

011
Category/
Type

Candidate Name

Steny Hamilton Hoyer

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : ED282B9DD5D23CAECEA

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Jim Renacci for Congress

Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281-8701

Purpose of Disbursement
2016 Primary

011
Category/
Type

Candidate Name

James B. Renacci

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 16

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : 27D9A5EDD0C2FC40868

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Joe Kennedy for Congress

Mailing Address PO Box 590464

City Newton State MA Zip Code 02459

Purpose of Disbursement
2016 Primary

011
Category/
Type

Candidate Name

Joseph Patrick Kennedy III

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 04

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : FBCC7D6F593B509EF06

Amount of Each Disbursement this Period

1000.00

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

5000.00

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Matsui for Congress

Mailing Address PO Box 1738

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
2016 Primary

011

Candidate Name

Doris O. Matsui

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : 8A77DDCED58EEF6C848

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. McHenry for Congress

Mailing Address PO Box 2165

City Gastonia State NC Zip Code 28053-2165

Purpose of Disbursement
2016 Primary

011

Candidate Name

Patrick Timothy McHenry

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 10

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : A9361B20DBE320B8395

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Mike Crapo for US Senate

Mailing Address PO Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement
2016 Primary

011

Candidate Name

Michael Dean Crapo

Category/
Type

Office Sought: House
 Senate
 President
State: ID District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : 02740355ECA0C249778

Amount of Each Disbursement this Period

2500.00

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

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Narragansett Bay PAC

Mailing Address PO Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Narragansett Bay PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2015

Transaction ID : 7923BB19D8F782EC64B

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. New Pioneers PAC

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2015 Contribution

011

Candidate Name

New Pioneers PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : 05CD5CDEDED9F7C2F819

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Pascrell for Congress

Mailing Address POB 100

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
2016 Primary

011

Candidate Name

William James Pascrell Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: NJ District: 09

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : 3B3D5A4C065B61C2A43

Amount of Each Disbursement this Period

2500.00

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

9000.00

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

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

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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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. People for Ben

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Ben Ray Lujan

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	0		2	0	1	5		

Transaction ID : 3A2E9F7B8D63BB50A11

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. People's Voice PAC

Mailing Address PO Box 685

City Madison State WI Zip Code 53701

Purpose of Disbursement
2015 Contribution

011

Category/
Type

Candidate Name

People's Voice PAC

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	0		2	0	1	5		

Transaction ID : 9F21499A66033D0223C

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

C. Price for Congress

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Thomas E. Price M.D.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		2	3		2	0	1	5		

Transaction ID : 86C927088323C46E2D4

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

7	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

7	5	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Richard E Neal for Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
2016 Primary

011

Candidate Name

Richard Edmund Neal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2015

Transaction ID : 86836B2B074E95F0908

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Scott Peters for Congress

Mailing Address PO Box 75357

City Washington State DC Zip Code 20002

Purpose of Disbursement
2016 Primary

011

Candidate Name

Scott H. Peters

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

MM / DD / YYYY
07 / 23 / 2015

Transaction ID : 7EE8890E27ACE4777B2

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Searchlight Leadership Fund

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Searchlight Leadership Fund

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2015

Transaction ID : AB7B6359274A33A4D82

Amount of Each Disbursement this Period

5000.00

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

9000.00

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

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

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

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Steve Israel for Congress Committee

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement
2016 Primary

011

Candidate Name

Steven Jay Israel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Transaction ID : 3DA587893221D8B51D7

Amount of Each Disbursement this Period

1	5	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Victory in November Election PAC (VINEPAC)

Mailing Address 700 13th Street, NW Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Victory in November Election PAC (VINEPAC)

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : 0F011F27F5A7BB4B130

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Voice for Freedom

Mailing Address 2700 Cumberland Parkway, Suite 150

City Atlanta State GA Zip Code 30339

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Voice for Freedom

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : E14E0A355031B98E3DF

Amount of Each Disbursement this Period

1	5	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5	5	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Vote To Elect Republicans Now PAC (VERN PAC)

Mailing Address 22780 Indian Creek Drive, Ste 100

City State Zip Code
Dulles VA 20166

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Vote To Elect Republicans Now PAC (VERN PAC)

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : 908016BEF2BF9C3E45E

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Welch for Congress

Mailing Address PO Box 1682

City State Zip Code
Burlington VT 05402

Purpose of Disbursement
2016 Primary

011

Candidate Name

Peter Francis Welch

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) **Contribution**

State: VT District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 10 / 2015

Transaction ID : 95A4F9E32236EA47AA5

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

2000.00

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

83000.00