FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

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	(a) Qua	rterly Reparts:		ue On:	1	Mar 2	0 (M3)	i di Name	Jun 2	0 (M6)		Sep 20 ((M9)	Mary .	Dec 20 ((Non-Electic Year Only)	
	-	April 15				Apr 20) (M4)	(mar)	Jul 20	(M7)	18 min	Oct 20 (M10)	हा न्य ५ स कर्म	Jan 31 (YE)
		Quarterly Report (Q July 15	1) (c)		•			Primary (12	2P)		Ge	neral (12G	i)		Runoff (1	2R)
	2.00	Quarterly Report (Q	2)		Election of			Convention	(12C)	F	Spe	ecial (12S))			
		October 15 Quarterly Report (Q	3)			•	XV-0' - 0'		/ [/b=		" ምም ምርም	~ ∵√~;	iı	n the	. متعالية	Secret.
	X	January 31 Year-End Report (Y	E)		1	Election	on	Summittees !	i.cc			للمحد		State of	tares	Caren 🖟
	nes.	July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d	POS	T-Elec	tion		General (3	0G)		Ru	noff (30R)	}		Special (30S)
	STATE OF THE STATE	Termination Report (TER)		пери	ort for	Election	on		/ 1000		enngerærg s Kælf-skriler	I		n the State of	P	
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Тур	e or Print	Name of Treasurer	·	Will	m		MT)	Muc	<u> </u>	MD	····					
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LO (J) 20307

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name WESTMED MEDICAL GROUP, P.C. PAC (WESTMED PAC) 0 7 0 1 Report Covering the Period: To: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 4 5 0 5 6 5 January 1, (b) Cash on Hand at 5 3 6 0 Beginning of Reporting Period...... 9,898,00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... 6 1 3 4 4 2 0 1 1 7. Total Disbursements (from Line 31).........

Cash on Hand at Close of Reporting Period

(subtract Line 7 from Line 6(d)).....

Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)



1 3 7 9 0 2 2

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 809-424-9530 Local 202-694-1100

FE6AN026

12030712956

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

WESTMED MEDICAL GROUP, P.C. PAC (WESTMED PAC)

Report Covering the Period:

From:

07 01 2011

1.2 3.1 2 0 1 1 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)	885000	989800
	(ii) Unitemized		damen's souther of the control of the color of the effect of parties of the color o
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	8,85000	989800
	(b) Political Party Committees		The section of the se
15	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	8,8,5,0,0,0	989800
	Party Committees		
	All Loans Received		
	Loan Repayments Received Offsets To Operating Expenditures		and the allowed Branch sections Branch sec Sec. Observance
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16.	Refunds of Contributions Made to Federal Candidates and Other		Language of the state of the st
17	Political Committees Other Federal Receipts		
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds		
70.	(a) Non-Federal Account	,	il her Amerikan den Amerikan Amerikan Amerikan di sakera Amerikan di sakera Amerikan di sakera di sakera di saker Bana Amerikan di sakera di saker
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(c) Total Trænsfers (add 18(a) and 18(b))		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	8,850,00	989800
20 .	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	8 8 5 0 0 0	989800

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:	Total Tills T Glod	Calendar real-to-bate
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	International statement of some succession of	and make and make some make and an all a some bear and an article of the some
	(i) Federal Share	the strength of the strength o	the section of the se
	(ii) Non-Federal Share	transfer and our Court from the subsect of the State of the subsect of the subsec	named a makera all has it has been still a make a still a million of their it leaves
	(b) Other Federal Operating Expenditures	4 2 0 1 1	6 1 3 4 3
	(c) Total Operating Expenditures	Land Land Land Land And Line Control Land	6 1 3 4 3;
	(add 21(a)(i), (a)(ii), and (b)) ▶	4 2 0 1 1	6 1 3 4 3
22.	Transfers to Affillated/Other Party	The state of the s	The state of the s
23	Contributions to		manufaces the collection of the male and the collection of the col
	Federal Candidates/Committees and Other Political Committees		<u> </u>
24.	Independent Expenditures		from the Theole with a Discharge of Beetle of
	(use Schedule E)		
25.	(2 U.S.C. §441a(d))		
	(use Schedule F)		
O.P.	Loop Bonovmente Made		The state of the s
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To: (a) Individuals/Persons Other	And the office of the state of	
	Than Political Committees	L. C. S. M. C. S. M. C. C. C. C.	
	(b) Dalbi-al Davis Committee		
	(b) Political Party Committees		and have been shown that the show that
	• •		langula na Grandaranikaranifa asili a alimahana langulara abah I
	(such as PACs)	Land of the State of the Darks about the State of the	he made analysis Alvis Alvinade and Canall starts, with withsimil
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	Profes Park Day Son Day 2 and a short and a selection of the selection of	
		र्कत्र । विकास क्रिया व राज्यात्रस क्रियाच राज्य क्रियाच (स्था क्रियाच्या क्रियाच्या क्रियाच्या क्रियाच्या क्र	المسالا معالات كمسكسه كالمعالات المسالات المسالا
29.	Other Disbursements	الم المستعلق والكيسة المراكبة والكيسة بهسية المراكبة والقيم الأ	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
			The state of the s
	(ii) "Levin" Share		[
	(b) Federal Election Activity Paid Entirely With Federal Funds		
	(c) Total Federal Election Activity (add	Barantarantara (2) and a makeur 2) was broad and the salarantarantarantarantarantarantarantara	والمستوال المستوالية والمستوالية والمستوال
	Lines 30(a)(i), 30(a)(ii) and 30(b))		i (
		Version Committee of Marine Committee of William Committee of Committe	Paradian diam'there benefit in Procedured and Decide in 13
31.	Total Disbursements (add Lines 21(c), 22,	in evilo neiline deen deen dela deen in ender me	್ರೀ ತಾಗ್ಗೆ ಜನವುಗಾಗ ಸಂಪರ್ವಿಗಾಗಿಯ ಸ್ಥಿಪ್ಪಿಸುತ್ತಾರೆ. ಸಮಾರ್ಥವಾಗಿಯ ಅಭಿವಾಗುವು
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4 2 0 1 1	6 1 3 4 3
20	Total Englard Dishuranments	The second secon	The second secon
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 3θ(a)(ii) from Line 31)	4 2 0 1 1	
		4 2 0 1 1	[

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. N	Net Contributions/Operating Expenditures	COLUMN A Total This Petiod	COLUMN B Calendar Year-to-Date
	otal Contributions (other than loans)	0 9 5 0 0 0	
	rom Line 11(d), page 3)	8 8 5 0 0 0	9,898,00
34. To	otal Contribution Refunds	hamilton burneds, and any farmething the property of the particular and any farmething the particular and an	 International Control of Section 2018 (Section 2018)
(fi	rom Line 28(d))		
35. N	et Contributions (other than loans)	housell minthess where many more than a large and and a second	
(s	ubtract Line 34 from Line 33)	8,8,5,0,0,0	9,8,9,8,0,0
36. To	otal Federal Operating Expenditures		the state of the s
(a	dd Line 21(a)(i) and Line 21(b))▶	4 2 0 1 1	6 1 3 4 3
37. O	ffsets to Operating Expenditures	Language of the college and the property of the college of the col	The same the same the same to the same that the same to the same that the same to the same
(fr	rem Line 15, page 3)		and the second control of the second control
	et Operating Experiditures	Em randisamed ki o modimenta kanandirantahan sida perdilamang organisation ordanisation galam stratograficancy, standisamang management organisation ordanisation ordanisation ordanisation organisation organisation organisation organisation or the standish or the standi	 Organizació e musició en distracció en la company como consistenció en la como properto en paraces.
	subtract Line 37 from Line 36)	4 2 0 1 1	6 1 3 4 3

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NAME OF COMMITTEE (In Full)	P.C. PAC (WESTMED PAC)				
Full Name (Last; First, Muddle Initial) A. ETTENSON, JOHN Mailing Address 15 FOX RIDGE RD City ARMONK FEC ID number of contributing federal political committee. Name of Employer WESTMED MEDICAL GROUP Receipt For: Primary General Other (specify) General	State Zip Code NY 10504 C 0 0 4 8 9 4 5 0 Occupation PHYSICIAN Aggregate Year-to-Date ▼ 2 5 0 0 0 0				
Full Name (Last, First, Middle Initial) WRIGHT, MIA Mailing Address 9 SILVER. STREAM DR. City W HARRISON FEC ID number of contributing federal political committee. Name of Employer WESTMED MEDICAL GROUP Receipt For:	State Zip Code NY 10604 C 0 0 4 8 9 4 5 0 Occupation PHYSICIAN Aggregate Year-to-Date	Date of Receipt O 7 2 2 2 2 2 0 1 1 Amount of Each Receipt this Period 5 0 0 0 0 0			
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Mailing Address 35 TOMPKINS RD City SCARSDALE FEC ID number of contributing federal political committee. Name of Employer WESTMED MEDICAL GROUP Receipt For: Primary General Other (specify)	State Zip Code NY 10583 C 0 0 4 8 9 4 5 0 Occupation PHYSICIAN Aggregate Year-to-Date 5 0 0 0 0	Date of Receipt 0 9 0 2 2 0 1 1 Amount of Each Receipt this Period 5 0 0 0 0 0			
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SCHEDULE A	(FEC Form 3X)
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ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) WESTMED MEDICAL GROUP, P.C	PAC (WESTMED PAC)					
RYE FEC ID number of contributing federal political committee. Name of Employer WESTMED MEDICAL GROUP Receipt For: Primary General Other (specify) ▼	State Zip Code NY 10580 200489450 cupation PHYSICIAN gregate Year-to-Date ▼ 25000	Date of Receipt O 9 1 6 2 0 1 15 Amount of Each Receipt this Period 2 5 0 0 0				
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	Full Name (Last; First; Middle Initial) MECHANIC, LAURA Mailing Address 22 EDITHS WAY City HASTINGS ON HUDSON FEC ID number of contributing federal political committee. Name of Employer WESTMED MEDICAL GROUP Receipt For: Primary General Other (specify) Other (specify)	Occupation PHYSI Aggregate		
В.	Full Name (Last, First, Middle friitial) KOLBOVSKY, JOSIF Mailing Address 149 WASHBURN RD City BRIARCLIFF FEC ID number of contributing federal political committee. Name of Employer WESTMED MEDICAL GROUP Receipt For: Primary General Other (specify) ▼	Occupation PHYSI Aggregate		Date of Receipt O 9 3 0 2 0 1 1 Amount of Each Receipt this Period 2 5 0 0 0 0
C.	Full Name (Last, First, Middle Initial) FRIEND, TODD Mailing Address 415 CORTLANDT AVE City MAMARONECK FEC ID number of contributing federal political nummittee. Name of Employer WESTMED MEDICAL GROUP Receipt For: Primary General Other (spenify) Other (spenify)	Occupation PHYSIC		
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Full Name (Last, First, Middle Initial) A. NEWMAN, BARNEY Mailing Address 58 TOP HILL LANE City MOUNT KISCO FEC ID number of contributing	State NY	Zip Code 10549		1 0 Imount	of I	1 Each	2 Rec	eipt thi	0 1 is Perio	od	
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Full Name (Last, First, Middle Initial) FRANCELLA, ANDREW Mailing Address 123 AVIEMORE DRIVE					Date of Receipt 1 0 1 2 2 0 1 1						
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Full Name (Last, First, Middle Initial) C. GRANO, VANESSA				Date of Receipt							
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SCHEDULE A (FEC Form 3X)

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Full Name (Last, First, Middle Initial) A. RIE, JONATHAN Mailing Address		Date of Receipt					
8 LEIR COURT City	State Zip Code	1 0 1 2 2 0 1 1					
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Full Name (Last, First, Middle Iπitial) B. GREENBERG, STEVEN		Date of Receipt					
Mailing Address 12 EDGEWOOD DR		1 0 1 2 2 0 1 1					
City RYE BROOK	State Zip Code NY 10573	Amount of Each Receipt this Period					
federal political committee.	C 0 0 4 8 9 4 5 0	2 5 0 0 0					
WESTMED MEDICAL GROUP	Occupation PHYSICIAN						
Primary General	Aggregate Year-to-Date ▼ 2 5 0 0 0						
Full Name (Last, First, Middle Initial) C. DASGUPTA, RANJAN		Date of Receipt					
Mailing Address 38 LONDON TERRACE		1 0 1 2 2 0 1 1					
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	y information copied from such Reports and S for commercial purposes, other than using the			
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Α.	Full Name (Last, First, Middle Initial) MOREL, RICHARD P			Date of Receipt
	Mailing Address 111 CLIFF AVE			
	City PELHAM	State NY	Zip Code 10803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 0 0	4 8 9 4 5 0	5 0 0 0 0
	Name of Employer WESTMED MEDICAL GROUP	Occupation PHYSIC	IAN	
	Receipt For: Primary General Other (specify) ▼		/ear-te-Date ▼ 5 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) LEGATT, ELIZABETH			Date of Receipt
	Mailing Address 14 DELLWOOD- RD			
	City WHITE PLAINS	State NY	Zip Code 10605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 0 0	4 8 9 4 5 0	10000
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С.	Full Name (Last, First, Middle Initial) NELSON, WILLIAM			Date of Receipt
	Mailing Address 426 LARCHMONT ACRES APT	10 14 12011		
	City LARCHMONT	State NY	Zip Code 10538	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 0 0	4 8 9 4 5 0	5 0 0 0 0
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SCHEDULE A (FEC FORM 3X)		Use separate schedule(s)	(check only one)
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WESTMED MEDICAL GROUP, E	P.C. PA	C (WESTMED PAC)	
Full Name (Last, First, Middle Initial) A. HIRSCH, JORDAN Mailing Address			Date of Receipt
City Character City	State	Zip Code	10126 2011
BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	$\mathbf{C} \circ \circ$	4 8 9 4 5 0	7 5 0 0 0
Name of Employer WESTMED MEDICAL GROUP	Occupation PHYSIC		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 	! [
Full Name (Last, First, Middle Initial) B. ARMBRUSTER, ROBERT	Date of Receipt		
Mailing Address 14 BANKS FARM ROAD City	State	Zip Code	
BEDFORD	NY	10506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	[C] 0 0	4 8 9 4 5 0	5 0 0 0 0
Name of Employer WESTMED MEDICAL GROUP	Occupation PHYSIC		
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