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

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

ADDRESS (number and street) ▼

317 Massachusetts Ave., N.E.

1st Floor

☐ Check if different than previously reported. (ACC)

Washington | DC | 20002 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00343137

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

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 MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

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 Lundy, W, , Douglas, MD, MBA

Signature of Treasurer *Lundy, W, , Douglas, MD, MBA* ***[Electronically Filed]*** Date 01 / 29 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 05/2016)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

Report Covering the Period: From: 07 / 01 / 2017 To: 12 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2017		610983.57
(b) Cash on Hand at Beginning of Reporting Period	767732.51	
(c) Total Receipts (from Line 19)	391857.81	1295104.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1159590.32	1906087.82
7. Total Disbursements (from Line 31)	480295.65	1226793.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	679294.67	679294.67
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. 05/2016)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

Report Covering the Period: From: M M 07 / D D 01 / Y Y Y Y 2017 To: M M 12 / D D 31 / Y Y Y Y 2017

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)	340628.67	1137543.49
(ii) Unitemized	41696.32	130508.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	382324.99	1268052.16
(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) ▶	382324.99	1268052.16
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)	7210.23	23704.71
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2322.59	3347.38
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)) ▶	391857.81	1295104.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	391857.81	1295104.25

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 05/2016)

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	8170.65	24518.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	8170.65	24518.15
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	471125.00	1190975.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	1000.00	1300.00
(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)) ▶	1000.00	1300.00
29. Other Disbursements (Including Non-Federal Donations)	0.00	10000.00
30. Federal Election Activity (52 U.S.C. § 30101(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))	480295.65	1226793.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	480295.65	1226793.15

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 05/2016)

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)	382324.99	1268052.16
34. Total Contribution Refunds (from Line 28(d))	1000.00	1300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	381324.99	1266752.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	8170.65	24518.15
37. Offsets to Operating Expenditures (from Line 15, page 3)	7210.23	23704.71
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	960.42	813.44

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sherbondy, Paul, Strawn, , MD

Mailing Address 507 Beaumont Drive

City: State College | State: PA | Zip Code: 16801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 01 / Y Y Y Y 2017

Transaction ID : 8691346

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Deffer, Philip, A, , Jr, MD

Mailing Address 1200 1st Ave E Ste C

City: Spencer | State: IA | Zip Code: 51301-4342

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Avera Heart Hospital of South Dakota
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 01 / Y Y Y Y 2017

Transaction ID : 8691347

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rungee, James, L, , MD

Mailing Address 2802 Pavilion Pl

City: Murfreesboro | State: TN | Zip Code: 37129

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tennessee Orthopedic Alliance
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: M M 07 / D D 01 / Y Y Y Y 2017

Transaction ID : 8691348

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mather, Richard, C, , III, MD

Mailing Address 115 Watts St

City: Durham | State: NC | Zip Code: 27701

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: M M 07 / D D 01 / Y Y Y Y 2017

Transaction ID : 8691349

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Craig, William, Lewis, , MD

Mailing Address 423 Arbor Rd

City: Winston Salem | State: NC | Zip Code: 27104-2019

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoCarolina
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 01 / Y Y Y Y 2017

Transaction ID : 8691350

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uppal, Renny, , , MD

Mailing Address 1730 Sharpe Hill Circle

City: Reno | State: NV | Zip Code: 89523-3924

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 02 / Y Y Y Y 2017

Transaction ID : 8691527

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

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Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wyatt, Ronald, W B, , MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: M M 07 / D D 03 / Y Y Y Y 2017

Transaction ID : 8691731

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Krueger, Chad, A, , MD

Mailing Address 208 Sundew Court

City: Southern Pines | State: NC | Zip Code: 28387

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 03 / Y Y Y Y 2017

Transaction ID : 8691732

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Santore, Richard, F, , MD

Mailing Address PO Box 7016

City: Rancho Santa Fe | State: CA | Zip Code: 92067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sharp Healthcare Hip Preservation Cent
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 04 / Y Y Y Y 2017

Transaction ID : 8693088

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 268.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mosley, Emmett, Wayne, , MD

Mailing Address 1309 Upland Crest Ct

City: Gulf Breeze | State: FL | Zip Code: 32563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: M M 07 / D D 04 / Y Y Y Y 2017

Transaction ID : 8693089

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Arvidson, Eric, B, , MD

Mailing Address 16 Pelham Rd

City: Salem | State: NH | Zip Code: 03079

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Essex Ortho & Optima Spts Med
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 07 / D D 04 / Y Y Y Y 2017

Transaction ID : 8693096

Amount of Each Receipt this Period: 300.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schmitz, Miguel, Antonio, , MD

Mailing Address 8624 E Maringo Dr

City: Spokane | State: WA | Zip Code: 99212

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedic and Spine PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 05 / Y Y Y Y 2017

Transaction ID : 8693097

Amount of Each Receipt this Period: 375.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 759.00

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)
[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allard, Mark, Michael, , MD

Mailing Address 3010 Cortney Circle

City: Siloam Springs | State: AR | Zip Code: 72761

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 05 / Y Y Y Y 2017

Transaction ID : 8693098

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pierron, Robert, Louis, , MD

Mailing Address 30765 Overlook Run

City: Buena Vista | State: CO | Zip Code: 81211-9836

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Retired
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8693715

Amount of Each Receipt this Period: 300.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Berg, Jeffrey, H, , MD

Mailing Address 1860 Town Center Dr Ste 300

City: Reston | State: VA | Zip Code: 20190

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): TCOA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694020

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 884.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DiPreta, John, Anthony, , MD

Mailing Address 1367 Washington Ave Ste 200

City: Albany | State: NY | Zip Code: 12206

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Capital Region Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694021

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jordan, Christopher, , , MD

Mailing Address 12440 NE 10th

City: Choctaw | State: OK | Zip Code: 73020

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694028

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hossack, Michael, D, , MD

Mailing Address 80 Old Colony Rd

City: Hartsdale | State: NY | Zip Code: 10530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Ctr for Orthopaedic Specialties of
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694029

Amount of Each Receipt this Period: 250.00

☐ Memo Item

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Arciero, Robert, A, , MD

Mailing Address 10 Fallbrook

City: Avon | State: CT | Zip Code: 06001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ of CT Health Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694030

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Michael, C, , MD

Mailing Address 21925 Stanford Circle

City: Elkhorn | State: NE | Zip Code: 68022

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694031

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Michael, A, , MD

Mailing Address 25005 Farnam Circle

City: Waterloo | State: NE | Zip Code: 68069

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694032

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Singer, William, Stuart, , MD

Mailing Address 10410 N 84th St

City: Omaha | State: NE | Zip Code: 68122

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694033

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Reynolds, Scott, B, , MD

Mailing Address 1408 N. 187th St.

City: Elkhorn | State: NE | Zip Code: 68022

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694034

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Neumann, Randall, Dean, , MD

Mailing Address 2725 S 144th St Ste 212

City: Omaha | State: NE | Zip Code: 68144-5253

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694035

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hutton, Kirk, , , MD

Mailing Address 2725 S 144th St Ste 212

City: Omaha | State: NE | Zip Code: 68144

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694036

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Goebel, Steven, X, , MD

Mailing Address 5316 Izard St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694037

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Goebel, Mark, E, , MD

Mailing Address 409 South 251st street

City: Waterloo | State: NE | Zip Code: 68069

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694038

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Galligan, John, D, , MD

Mailing Address 555 S 166th st

City: Omaha | State: NE | Zip Code: 68118

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694039

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ferlic, Thomas, Patrick, , MD

Mailing Address Nebraska Ortho Assoc
2725 S 144th St Ste 110

City: Omaha | State: NE | Zip Code: 68144-5253

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694040

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Canedy, James, T, , MD

Mailing Address 448 South 82nd St

City: Omaha | State: NE | Zip Code: 68114

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694041

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Buzzell, Jonathan, E, , MD

Mailing Address 2725 S 144th St Ste 212

City: Omaha | State: NE | Zip Code: 68144

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694042

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Burt, Charles, F, , MD

Mailing Address 2725 S 144th St Ste 212

City: Omaha | State: NE | Zip Code: 68144-5253

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694044

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bruggeman, Nicholas, Benjamin, , MD

Mailing Address 22626 Atwood Ave

City: Elkhorn | State: NE | Zip Code: 68022-3147

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694045

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brown, David, E, , MD

Mailing Address 15617 Woolworth Ave

City: Omaha | State: NE | Zip Code: 68130

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orhtopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694046

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Porter, Scott, Edward, , MBA,MD

Mailing Address 1420 Jonesville Road

City: Simpsonville | State: SC | Zip Code: 29681

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694123

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Green, Daniel, William, , MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1225.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694124

Amount of Each Receipt this Period: 175.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 759.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lagan, Casey, Lee, , MD

Mailing Address 224 E 2nd Street

City: Dumas | State: TX | Zip Code: 79029

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Moore County Hospital District
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694125

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gillespy, Albert, W, , MD

Mailing Address 790 John Anderson Dr

City: Ormond Beach | State: FL | Zip Code: 32176

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694126

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garner, Richard, W, , MD

Mailing Address 7201 E Chester Heights Circle

City: Anchorage | State: AK | Zip Code: 99504-3563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694127

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1335.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tyndall, William, A, , MD

Mailing Address 123 Brittany Ln

City: Hollidaysburg | State: PA | Zip Code: 16648

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 668.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694128

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Joel, D, , MD

Mailing Address Tucson Shoulder Elbow & Hand
3972 N Campbell Ave

City: Tucson | State: AZ | Zip Code: 85719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tucson Shoulder Elbow & Hand
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694129

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Luchini, Michael, A, , MD

Mailing Address 1481 Chapel St

City: New Haven | State: CT | Zip Code: 06511-4305

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694431

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Toman, Jared, A, , MD, MBA

Mailing Address 105 Lower Meigs Rd

City: Moultrie | State: GA | Zip Code: 31768-0495

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southactive Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694432

Amount of Each Receipt this Period: 200.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hubbard, Charles, N, , MD

Mailing Address 210 Habersham Pl

City: Carrollton | State: GA | Zip Code: 30117

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Retired
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694433

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Montalbano, Gregory, , , MD

Mailing Address 72 Mercer St Apt 4E

City: New York | State: NY | Zip Code: 10012-4494

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 875.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694435

Amount of Each Receipt this Period: 875.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2075.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kofoed, John, Charles, , MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sutter Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694436

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Urban, Joshua, Aaron, , MD

Mailing Address 9330 N 225th St

City: Elkhorn | State: NE | Zip Code: 68022-3600

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694437

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Arnold, Ryan, M, , MD

Mailing Address 2453 S 191 Circle

City: Omaha | State: NE | Zip Code: 68130

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694438

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1084.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'Neil, Michael, T, , MD

Mailing Address Nebraska Ortho Assoc LLP
2725 S 144th St Ste 110

City: Omaha | State: NE | Zip Code: 68144-5253

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694439

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Reynolds, Scott, B, , MD

Mailing Address 1408 N. 187th St.

City: Elkhorn | State: NE | Zip Code: 68022

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694440

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hagan, Steven, V, , MD

Mailing Address 2629 S 96 Circle

City: Omaha | State: NE | Zip Code: 68124

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoNebraska
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8694441

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yun, Jean, S, , MD

Mailing Address 416 Washington St Apt 2G

City: New York | State: NY | Zip Code: 10013

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694457

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Egol, Kenneth, A, , MD

Mailing Address 301 E 17th St Ste 1402

City: New York | State: NY | Zip Code: 10003

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694458

Amount of Each Receipt this Period: 125.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bercik, Robert, J, , MD

Mailing Address 1445 Raritan Rd

City: Clark | State: NJ | Zip Code: 07066-1230

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2017

Transaction ID : 8694459

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 875.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clain, Michael, R, , MD

Mailing Address 9 Indian Head Rd

City: Riverside | State: CT | Zip Code: 06878

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 09 / Y Y Y Y 2017

Transaction ID : 8695113

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lundy, Gordon, C, , MD

Mailing Address 2100 Webster St Ste 117

City: San Francisco | State: CA | Zip Code: 94115

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 09 / Y Y Y Y 2017

Transaction ID : 8695114

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Braaton, Paul, J, , MD

Mailing Address 1335 Coffee Rd Ste 100

City: Modesto | State: CA | Zip Code: 95355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 654.00

Date of Receipt: M M 07 / D D 09 / Y Y Y Y 2017

Transaction ID : 8695116

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lintecum, Neal, D, , MD

Mailing Address 789 N 1500 Road

City: Lawrence | State: KS | Zip Code: 66049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: M M 07 / D D 10 / Y Y Y Y 2017

Transaction ID : 8695117

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Badia, Alejandro, , , MD

Mailing Address 3650 NW 82nd Ave Ste 103

City: Doral | State: FL | Zip Code: 33166

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Badia Hand to Shoulder Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 11 / Y Y Y Y 2017

Transaction ID : 8733352

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gill, John, T, , MD

Mailing Address 8230 Walnut Hill Lane
Suite 708

City: Dallas | State: TX | Zip Code: 75231

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 11 / Y Y Y Y 2017

Transaction ID : 8733353

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Greenfield, Gerald, Q, , Jr, MD

Mailing Address 12 Remington Run

City: San Antonio | State: TX | Zip Code: 78258-7707

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 11 / Y Y Y Y 2017

Transaction ID : 8734421

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mencio, Gregory, A, , MD

Mailing Address 906 Riverbend Rd

City: Nashville | State: TN | Zip Code: 37221

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 11 / Y Y Y Y 2017

Transaction ID : 8734465

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Alhadeff, Joseph, E, , MD

Mailing Address 710 Oakwood Dr

City: Red Lion | State: PA | Zip Code: 17356

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OSS Orthopaedic Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 3200.00

Date of Receipt: M M 07 / D D 12 / Y Y Y Y 2017

Transaction ID : 8734466

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gerling, Michael, C, , MD

Mailing Address 506 5th Avenue #2FF

City: Brooklyn | State: NY | Zip Code: 11215

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 07 / D D 12 / Y Y Y Y 2017

Transaction ID : 8734467

Amount of Each Receipt this Period: 200.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 13 / Y Y Y Y 2017

Transaction ID : 8734594

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jamison, James, P, , MD

Mailing Address 7092 Killdeer Drive

City: Canfield | State: OH | Zip Code: 44406

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 13 / Y Y Y Y 2017

Transaction ID : 8734595

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 534.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hussain, Suleman, M, , MD

Mailing Address 2300 53rd Street, Suite #100

City: Bettendorf | State: IA | Zip Code: 52804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 07 / 14 / 2017
Transaction ID : 8735069

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Olin, Matthew, David, , MD

Mailing Address 605 Sunset Dr

City: Greensboro | State: NC | Zip Code: 27408-6412

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 14 / 2017
Transaction ID : 8735070

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Jeffrey, Mark, , MD

Mailing Address 610 San Elijo St

City: San Diego | State: CA | Zip Code: 92106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UNITE Orthopaedics Foundation
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 14 / 2017
Transaction ID : 8735071

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linschoten, Niels, J, , MD

Mailing Address 11428 Center Court Blvd

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8735072

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Matthew, R, , MD

Mailing Address 920 Avenue B

City: Marrero | State: LA | Zip Code: 70072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8735073

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weisman, David, S, , MD

Mailing Address 585 Cranbury Rd

City: East Brunswick | State: NJ | Zip Code: 08816-4026

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): POA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736278

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Greider, Thomas, David, , MD

Mailing Address 5210 Brae Burn

City: Bellaire | State: TX | Zip Code: 77401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Bone & Joint Clinic of Houston
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736280

Amount of Each Receipt this Period: 200.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Noel, Curtis, R, , MD

Mailing Address 493 Misty Ln

City: Copley | State: OH | Zip Code: 44321

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Crystal Clinic Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736281

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kamps, Bryan, Scott, , MD

Mailing Address 3741 Monarch Dr NE

City: Grand Rapids | State: MI | Zip Code: 49525

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spectrum Health Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736282

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Suk, Michael, , , MD

Mailing Address 1095 Limestoneville Road

City: Milton | State: PA | Zip Code: 17847

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736318

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hopkins, Mark, D, , MD

Mailing Address 2320 W Avenue O 4

City: Palmdale | State: CA | Zip Code: 93551

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736322

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Warden, William, H, , III, MD

Mailing Address 2760 Atlantic Ave

City: Long Beach | State: CA | Zip Code: 90806

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Memorial Ortho Surgical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736324

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Suk, Michael, , , MD

Mailing Address 1095 Limestoneville Road

City: Milton | State: PA | Zip Code: 17847

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8736326

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Abrutyn, David, A, , MD

Mailing Address 20 Pitney Court

City: Basking Ridge | State: NJ | Zip Code: 07920

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 14 / Y Y Y Y 2017

Transaction ID : 8752154

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weinstein, Richard, N, , MD

Mailing Address 21 Long Pond Rd

City: Armonk | State: NY | Zip Code: 10504

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 16 / Y Y Y Y 2017

Transaction ID : 8755220

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Matthew, J, , MD

Mailing Address 14912 Chopine Pass

City: Roanoke | State: IN | Zip Code: 46783-9308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Hospital of Lutheran He
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 07 / 16 / 2017
Transaction ID : 8755221

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maender, Christopher, W, , MD

Mailing Address 4509 Turtle Bay

City: Springfield | State: IL | Zip Code: 62711

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 17 / 2017
Transaction ID : 8755405

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kwok, Moody, , , MD

Mailing Address 708 Presidential Dr

City: Horsham | State: PA | Zip Code: 19044

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 17 / 2017
Transaction ID : 8755406

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 585.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayden, Shawn, A, , MD

Mailing Address 5124 Marble Falls Ln

City: Plano | State: TX | Zip Code: 75093-7545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 07 / D D 17 / Y Y Y Y 2017

Transaction ID : 8755407

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Newson, Graham, , ,

Mailing Address 317 Massachusetts Ave NE
1st Floor

City: Washington | State: DC | Zip Code: 20002-5769

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): American Academy of Orthopaedic Surg
Occupation (for Individual): Director, Office of Goverment Relation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 05 / Y Y Y Y 2017

Transaction ID : 8755927

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parsley, Brian, S, , MD

Mailing Address 5420 West Loop South, Ste 2400

City: Bellaire | State: TX | Zip Code: 77401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTHealth Physicians
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 05 / Y Y Y Y 2017

Transaction ID : 8755933

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) for each category of the Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vessely, Michael, B, , MD

Mailing Address 522 Second St

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Willamette Valley Medical Center-
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 05 / Y Y Y Y 2017

Transaction ID : 8755949

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheehan, John, P, , MD

Mailing Address 6621 Cuming St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Boys Town
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 06 / Y Y Y Y 2017

Transaction ID : 8755953

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Quesada, Mario, J, , MD

Mailing Address 32610 Whipple Rd

City: Los Fresnos | State: TX | Zip Code: 78566-4204

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 12 / Y Y Y Y 2017

Transaction ID : 8755974

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dhillon, Manjit, S, , MD

Mailing Address 12705 Hogans Dr

City: Chester | State: VA | Zip Code: 23836

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southside Regional Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 18 / Y Y Y Y 2017

Transaction ID : 8756406

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raut, Sourendra, Sean, , MD

Mailing Address 6020 Falls Landing Drive

City: Cumming | State: GA | Zip Code: 30040

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 18 / Y Y Y Y 2017

Transaction ID : 8756407

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Napoli, David, C, , MD

Mailing Address 107 Bent Creek Preserve Rd

City: Asheville | State: NC | Zip Code: 28806

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: M M 07 / D D 18 / Y Y Y Y 2017

Transaction ID : 8756408

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russell, George, V, , Jr, MD

Mailing Address 102 Hawthorne Vale

City: Ridgeland | State: MS | Zip Code: 39157

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ of Mississippi Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 07 / 18 / 2017
Transaction ID : 8756947

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shah, Roshan, P, , MD, JD

Mailing Address 610 West 110th Street
Apt 3E

City: New York | State: NY | Zip Code: 10025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Columbia University Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 07 / 19 / 2017
Transaction ID : 8757355

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coles, Robert, E, , MD

Mailing Address 201 Lands End Rd

City: Morehead City | State: NC | Zip Code: 28557

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Center For Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 07 / 19 / 2017
Transaction ID : 8757356

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Matzkin, Elizabeth, G, , MD

Mailing Address 1573 Beacon St

City: Newton | State: MA | Zip Code: 02468

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Brigham and Women's Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 19 / 2017
Transaction ID : 8757812

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooper, Scott, Snow, , MD

Mailing Address 407 NW A St

City: Bentonville | State: AR | Zip Code: 72712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 07 / 20 / 2017
Transaction ID : 8758105

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schmidt, Todd, A, , MD

Mailing Address 2865 Lake Park Drive

City: Jonesboro | State: GA | Zip Code: 30236

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoAtlanta
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 07 / 21 / 2017
Transaction ID : 8758664

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[x] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, David, R, , MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8758665

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCrosson, John, J, , MD

Mailing Address 2749 Fountainhead Way

City: Mount Pleasant | State: SC | Zip Code: 29466-8590

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Charleston Hip & Knee Replacement Cent
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8758666

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stoeckl, Andrew, , , MD

Mailing Address 90 Fairlawn Dr

City: Amherst | State: NY | Zip Code: 14226

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 583.31

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8758667

Amount of Each Receipt this Period: 83.33

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chapman, Cary, B, , MD

Mailing Address 51 Flagg Court

City: Staten Island | State: NY | Zip Code: 10304

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8758668

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannada, Lisa, K, , MD

Mailing Address 12872 Willow Pond Court

City: Saint Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Louis Univ School of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8758669

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swenning, Todd, Allen, , MD

Mailing Address 41970 Rancho Manana Lane

City: Rancho Mirage | State: CA | Zip Code: 92270

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Institute of Clinical Orthopedics & Ne
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8758670

Amount of Each Receipt this Period: 90.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 258.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mansfield, David, J, , MD

Mailing Address 773 Azalea Pl

City: El Paso | State: TX | Zip Code: 79922

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): El Paso Orthopaedic Surgery Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 838.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2017

Transaction ID : 8762470

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCulloch, Patrick, T, , MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Ortho & Rehab
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2017

Transaction ID : 8762471

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Halsey, David, A, , MD

Mailing Address PO Box 9000 #132

City: Edgartown | State: MA | Zip Code: 02539

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Martha's Vineyard Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2017

Transaction ID : 8762473

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
More, Robert, Cameron, , MD

Mailing Address 8100 Wescott Drive
Suite 101

City: Flemington | State: NJ | Zip Code: 08822

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hunterdon Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2017
Transaction ID : 8762474

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hackbarth, Donald, A, , Jr, MD

Mailing Address N70 W14567 Terrace Drive

City: Menomonee Falls | State: WI | Zip Code: 53051

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Medical College of Wisconsin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2017
Transaction ID : 8762476

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eckrich, Stephen, G J, , MD

Mailing Address 5511 Shooting Star Trail

City: Rapid City | State: SD | Zip Code: 57702

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 501.00

Date of Receipt: M M 07 / D D 23 / Y Y Y Y 2017
Transaction ID : 8762522

Amount of Each Receipt this Period: 83.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 417.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Navarro, Ronald, Anthony, , MD

Mailing Address 18 Wide Loop Rd

City: Rolling Hills | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente South Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: M M 07 / D D 23 / Y Y Y Y 2017

Transaction ID : 8762523

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Noffsinger, Mark, A, , MD

Mailing Address 7208 Selah Court

City: Mattawan | State: MI | Zip Code: 49071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 23 / Y Y Y Y 2017

Transaction ID : 8762524

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scales, Darrell, Kevin, , MD

Mailing Address 2000 Tee Dr

City: Braselton | State: GA | Zip Code: 30517-4078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: M M 07 / D D 23 / Y Y Y Y 2017

Transaction ID : 8762525

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Barber, Thomas, C, , MD

Mailing Address 6 EL Caminito

City: Orinda | State: CA | Zip Code: 94563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente Medical Center

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 23 / Y Y Y Y 2017

Transaction ID : 8762526

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pavlatos, Christ, J, , MD, MBA

Mailing Address 1301 North Dearborn Unit 804

City: Chicago | State: IL | Zip Code: 60610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt: M M 07 / D D 23 / Y Y Y Y 2017

Transaction ID : 8762527

Amount of Each Receipt this Period: 41.67

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartsock, Langdon, A, , MD

Mailing Address 188 Tradd Street

City: Charleston | State: SC | Zip Code: 29401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Med Univ of SC

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8762536

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 375.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Torres, Daniel, , , MD

Mailing Address 1488 Shelburne Ct

City: Allentown | State: PA | Zip Code: 18104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Texas Med Branch
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8762537

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Malone, Stephen, L, , MD

Mailing Address 923 Westover Rd

City: Wilmington | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopaedic Spine Ctr PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8762538

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kaminski, Ken, J, , MD

Mailing Address 6987 Canal St

City: Tyler | State: TX | Zip Code: 75703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Azalea Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8764117

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 435.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Georgopoulos, Gaia, , , MD

Mailing Address 7294 S Uravan Ct

City: Foxfield | State: CO | Zip Code: 80016

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Colorado
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8764118

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kaminski, Ken, J, , MD

Mailing Address 6987 Canal St

City: Tyler | State: TX | Zip Code: 75703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Azalea Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8764124

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nygaard, Airell, L, , MD

Mailing Address 17600 Fitch Ranch Rd

City: Sonora | State: CA | Zip Code: 95370

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8764137

Amount of Each Receipt this Period: 200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lovejoy, John, Fletcher, , MD

Mailing Address 4106 Isle Vista Avenue

City: Belle Isle | State: FL | Zip Code: 32812

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Nemours Children's Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 07 / D D 21 / Y Y Y Y 2017

Transaction ID : 8764139

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wills, Christopher, A, , MD

Mailing Address 11622 Vista Mar

City: North Tustin | State: CA | Zip Code: 92705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 25 / Y Y Y Y 2017

Transaction ID : 8764151

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fernandez, Rafael, M, , MD

Mailing Address 100 State Ave

City: Faribault | State: MN | Zip Code: 55021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: M M 07 / D D 25 / Y Y Y Y 2017

Transaction ID : 8764152

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hire, Justin, , , MD

Mailing Address 205 Tremont Drive

City: Waynesville | State: MO | Zip Code: 65583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt: M M 07 / D D 25 / Y Y Y Y 2017

Transaction ID : 8764153

Amount of Each Receipt this Period: 42.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Espinoza, Luis, M, , MD

Mailing Address 5 Savannah Ridge Lane

City: Metairie | State: LA | Zip Code: 70001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 590.00

Date of Receipt: M M 07 / D D 25 / Y Y Y Y 2017

Transaction ID : 8764154

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Callahan, Bert, C, , MD

Mailing Address 511 N Center St

City: Beaver Dam | State: WI | Zip Code: 53916-3071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fond Du Lac Regional Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2017

Transaction ID : 8764494

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 211.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Seitz, William, H, , Jr, MD

Mailing Address 1730 W 25th St
2C

City: Cleveland | State: OH | Zip Code: 44113

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2017

Transaction ID : 8764495

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Haynes, David, E, , MD

Mailing Address 1620 Estates Drive

City: Woodway | State: TX | Zip Code: 76712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southwest Sports Medicine and Orthopae
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 25 / Y Y Y Y 2017

Transaction ID : 8764521

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sieger, David, D, , MD

Mailing Address 31 Olde Mill Ct

City: Lititz | State: PA | Zip Code: 17543

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 25 / Y Y Y Y 2017

Transaction ID : 8764522

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carroll, Paul, Francis, , MD

Mailing Address 170 N Pointe Blvd

City: Lancaster | State: PA | Zip Code: 17601

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Assoc of Lancaster
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 25 / 2017
Transaction ID : 8764523

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooke, Christopher, C, , MD

Mailing Address 15 Lark Lane

City: Lancaster | State: PA | Zip Code: 17603

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Assoc Lancaster
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 25 / 2017
Transaction ID : 8764524

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kofoed, John, Charles, , MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sutter Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 07 / 25 / 2017
Transaction ID : 8764525

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2084.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Alhadeff, Joseph, E, , MD

Mailing Address 710 Oakwood Dr

City: Red Lion | State: PA | Zip Code: 17356

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OSS Orthopaedic Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 4200.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2017

Transaction ID : 8766372

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hessing, Jeffrey, Glenn, , MD

Mailing Address 6748 N Double Eagle Ln

City: Meridian | State: ID | Zip Code: 83646-5190

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Treasure Valley Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2017

Transaction ID : 8766424

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hyatt, Adam, E, , MD

Mailing Address 687 Warminster Lane

City: Lititz | State: PA | Zip Code: 17543

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Assoc. of Lancaster
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 27 / Y Y Y Y 2017

Transaction ID : 8766701

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baca, Marshall, G, , MD

Mailing Address 2301 W Ray

City: Artesia | State: NM | Zip Code: 88210

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 07 / D D 27 / Y Y Y Y 2017

Transaction ID : 8766702

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kirol, Bernard, G, , MD

Mailing Address 106 Buckthorn Circle

City: Elgin | State: SC | Zip Code: 29045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics, PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: M M 07 / D D 27 / Y Y Y Y 2017

Transaction ID : 8767003

Amount of Each Receipt this Period: 75.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Halikis, Nicholas, M, , MD

Mailing Address 23456 Hawthorne Blvd Ste 300

City: Torrance | State: CA | Zip Code: 90505

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8767285

Amount of Each Receipt this Period: 300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 625.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giammattei, Frank, P, , MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Premier Orthopaedic Associates

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 07 / 28 / 2017

Transaction ID : 8768119

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mitros, Stephen, F, , MD

Mailing Address 51045 Erin Glen Dr

City: Granger | State: IN | Zip Code: 46530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mitros Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 07 / 28 / 2017

Transaction ID : 8768120

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Adamson, Kent, R, , MD

Mailing Address 225 Via Rancho

City: San Clemente | State: CA | Zip Code: 92672

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 28 / 2017

Transaction ID : 8768121

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gary, Joshua, Layne, , MD

Mailing Address 4226 Byron

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8768122

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Easley, Mark, E, , MD

Mailing Address Duke Medicine
4709 Creekstone Drive

City: Durham | State: NC | Zip Code: 27703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8768123

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carolan, Gregory, Francis, , MD

Mailing Address 1806 Meadow Ridge Ct

City: Bethlehem | State: PA | Zip Code: 18015

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Luke's Ortho Surg Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 788.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8768124

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, W, Stanley, , MD

Mailing Address 108 Valerie Dr

City: Lafayette | State: LA | Zip Code: 70508-6008

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8768125

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bass, Robert, L, , MD

Mailing Address 5721 Salisbury

City: Prosper | State: TX | Zip Code: 75078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTSW
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8768127

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Terek, Richard, M, , MD

Mailing Address 2 Dudley St Ste 200

City: Providence | State: RI | Zip Code: 02905-3252

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics, Inc
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8768349

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1084.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McClelland, Walter, B, , Jr, MD

Mailing Address 3531 Nancy Creek Road

City: Atlanta | State: GA | Zip Code: 30327

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Peachtree Orthopaedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 31 / Y Y Y Y 2017

Transaction ID : 8768779

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Slover, James, D, , MD

Mailing Address 303 East 33rd Street
Apt 8A

City: New York | State: NY | Zip Code: 10016

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): New York University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 07 / D D 31 / Y Y Y Y 2017

Transaction ID : 8768780

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sherbondy, Paul, Strawn, , MD

Mailing Address 507 Beaumont Drive

City: State College | State: PA | Zip Code: 16801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 01 / Y Y Y Y 2017

Transaction ID : 8768861

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 784.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rungee, James, L, , MD

Mailing Address 2802 Pavilion Pl

City: Murfreesboro | State: TN | Zip Code: 37129

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tennessee Orthopedic Alliance
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: M M 08 / D D 01 / Y Y Y Y 2017

Transaction ID : 8768862

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mather, Richard, C, , III, MD

Mailing Address 115 Watts St

City: Durham | State: NC | Zip Code: 27701

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: M M 08 / D D 01 / Y Y Y Y 2017

Transaction ID : 8768863

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uppal, Renny, , , MD

Mailing Address 1730 Sharpe Hill Circle

City: Reno | State: NV | Zip Code: 89523-3924

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 02 / Y Y Y Y 2017

Transaction ID : 8769377

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 269.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bailey, James, R, , MD

Mailing Address 10439 Blue Summit Court

City: San Diego | State: CA | Zip Code: 92131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: M M 07 / D D 17 / Y Y Y Y 2017

Transaction ID : 8769689

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jiranek, William, A, , MD

Mailing Address 4066 Old River Trail

City: Powhatan | State: VA | Zip Code: 23139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8769690

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brown, Howard, R, , MD, FACS

Mailing Address 5224 Purnell Road

City: Wake Forest | State: NC | Zip Code: 27587-7523

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kerr Lake Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8769691

Amount of Each Receipt this Period: 1200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1368.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Besh, Basil, R, , MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): FORM Hand, Wrist & Elbow Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 24 / Y Y Y Y 2017

Transaction ID : 8769692

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sastry, Akhilesh, , , MD

Mailing Address 9 Halfpenny Ln

City: Exeter | State: NH | Zip Code: 03833

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sports Medicine Atlantic Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2017

Transaction ID : 8769697

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damalas, Dino, , ,

Mailing Address 9400 Higgins Rd

City: Rosemont | State: IL | Zip Code: 60018-4974

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): AAOS
Occupation (for Individual): Chief Operations Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2017

Transaction ID : 8769699

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Saenz, Cesar, L, , MD

Mailing Address 1300 Stillwater Dr

City: Miami Beach | State: FL | Zip Code: 33141

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Leon Medical Centers
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 27 / Y Y Y Y 2017

Transaction ID : 8769701

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stephenson, John, Michael, , MD

Mailing Address 23 Hickory Creek Dr

City: Little Rock | State: AR | Zip Code: 72212-2509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Arkansas For Medical Sci
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8769704

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kensinger, Daniel, , , MD

Mailing Address 964 Wynstone Dr

City: Jefferson | State: SD | Zip Code: 57038

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CNOS
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8769705

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Delanois, Ronald, Emilio, , MD

Mailing Address 6 Brookfield Garth

City: Lutherville Timonium | State: MD | Zip Code: 21093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lifebridge
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8769706

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carson, Eric, Ward, , MD

Mailing Address 802 Village Rd

City: Charlottesville | State: VA | Zip Code: 22903

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Virginia
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8769707

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iorio, Richard, , , MD

Mailing Address 1 Indian Hill Road

City: New Rochelle | State: NY | Zip Code: 10804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 436.00

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8769709

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mejia, Alfonso, , , MD, MPH

Mailing Address 5332 South Shore Drive

City: Chicago | State: IL | Zip Code: 60615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Association of Orthopedic Sur
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 07 / 28 / 2017
Transaction ID : 8769710

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waddell, Bradford, Sutton, , MD

Mailing Address 235 North Regent St.

City: Port Chester | State: NY | Zip Code: 10573

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 07 / 31 / 2017
Transaction ID : 8769712

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wyatt, Ronald, W B, , MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 08 / 03 / 2017
Transaction ID : 8770942

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 268.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Krueger, Chad, A, , MD

Mailing Address 208 Sundew Court

City: Southern Pines | State: NC | Zip Code: 28387

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 03 / Y Y Y Y 2017

Transaction ID : 8770943

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lieberman, Isador, H, , MD, MBA, F

Mailing Address Scoliosis and Spine Tumor Center
6020 W Parker Rd, Ste 200

City: Plano | State: TX | Zip Code: 75093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Texas Back Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 04 / Y Y Y Y 2017

Transaction ID : 8771827

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Renard, Regis, Louis, , MD

Mailing Address 21 Farnham Loop

City: Little Rock | State: AR | Zip Code: 72223

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UAMS, Department of Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 04 / Y Y Y Y 2017

Transaction ID : 8771828

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Santore, Richard, F, , MD

Mailing Address PO Box 7016

City: Rancho Santa Fe | State: CA | Zip Code: 92067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sharp Healthcare Hip Preservation Cent

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 04 / 2017

Transaction ID : 8771829

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mosley, Emmett, Wayne, , MD

Mailing Address 1309 Upland Crest Ct

City: Gulf Breeze | State: FL | Zip Code: 32563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 08 / 04 / 2017

Transaction ID : 8771830

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vizzi, Peter, D, , MD

Mailing Address 318 Beverly Drive

City: Lafayette | State: LA | Zip Code: 70503

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 04 / 2017

Transaction ID : 8771867

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allard, Mark, Michael, , MD

Mailing Address 3010 Cortney Circle

City: Siloam Springs | State: AR | Zip Code: 72761

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 05 / Y Y Y Y 2017

Transaction ID : 8772254

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Daniel, Richard, , MD

Mailing Address 654 W Sawgrass Trail

City: Dakota Dunes | State: SD | Zip Code: 57049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CNOS
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: M M 08 / D D 05 / Y Y Y Y 2017

Transaction ID : 8772258

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cameron, Julian A, , , MD

Mailing Address 405 S Riverside Dr

City: Pompano Beach | State: FL | Zip Code: 33062

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Comprehensive Spine Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 06 / Y Y Y Y 2017

Transaction ID : 8772301

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davidson, Randall, L, , Jr, MD

Mailing Address 1050 N James Campbell Blvd Ste 200

City: Columbia | State: TN | Zip Code: 38401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 06 / Y Y Y Y 2017

Transaction ID : 8772302

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Green, Daniel, William, , MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: M M 08 / D D 07 / Y Y Y Y 2017

Transaction ID : 8772783

Amount of Each Receipt this Period: 175.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garner, Richard, W, , MD

Mailing Address 7201 E Chester Heights Circle

City: Anchorage | State: AK | Zip Code: 99504-3563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: M M 08 / D D 07 / Y Y Y Y 2017

Transaction ID : 8772784

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tyndall, William, A, , MD

Mailing Address 123 Brittany Ln

City: Hollidaysburg | State: PA | Zip Code: 16648

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 752.00

Date of Receipt: M M 08 / D D 07 / Y Y Y Y 2017

Transaction ID : 8772785

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Joel, D, , MD

Mailing Address Tucson Shoulder Elbow & Hand
3972 N Campbell Ave

City: Tucson | State: AZ | Zip Code: 85719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tucson Shoulder Elbow & Hand
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 07 / Y Y Y Y 2017

Transaction ID : 8772786

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rosenwasser, Melvin, Paul, , MD

Mailing Address 38 Ludlow Ln

City: Palisades | State: NY | Zip Code: 10964

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 08 / Y Y Y Y 2017

Transaction ID : 8773902

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weiss, Molly, Ann, , MD

Mailing Address 2361 Azteca Drive

City: Vincennes | State: IN | Zip Code: 47591

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 08 / Y Y Y Y 2017

Transaction ID : 8773903

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Taksali, Sudeep, , , MD

Mailing Address 7535 SW Schroeder Way

City: Wilsonville | State: OR | Zip Code: 97070-9574

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hope Orthopedics of Oregon
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 08 / Y Y Y Y 2017

Transaction ID : 8773904

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Justice, Benjamin, Jay, , MD

Mailing Address 4676 Pascagoula Run

City: Greenwood | State: IN | Zip Code: 46143

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 08 / Y Y Y Y 2017

Transaction ID : 8773975

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weber, Stephen, C, , MD

Mailing Address 423 St. Lawrence Dr.

City: Silver Spring | State: MD | Zip Code: 20901-2626

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 08 / 08 / 2017
Transaction ID : 8774091

Amount of Each Receipt this Period: 350.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bash, Jeffrey, A, , MD

Mailing Address 97 Balfour Dr

City: West Hartford | State: CT | Zip Code: 06117

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 08 / 08 / 2017
Transaction ID : 8774092

Amount of Each Receipt this Period: 540.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clain, Michael, R, , MD

Mailing Address 9 Indian Head Rd

City: Riverside | State: CT | Zip Code: 06878

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 09 / 2017
Transaction ID : 8774176

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 974.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lundy, Gordon, C, , MD

Mailing Address 2100 Webster St Ste 117

City: San Francisco | State: CA | Zip Code: 94115

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 09 / Y Y Y Y 2017

Transaction ID : 8774177

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Braaton, Paul, J, , MD

Mailing Address 1335 Coffee Rd Ste 100

City: Modesto | State: CA | Zip Code: 95355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 738.00

Date of Receipt: M M 08 / D D 09 / Y Y Y Y 2017

Transaction ID : 8774179

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Elzaim, Haissam, S, , MD

Mailing Address 112 Cardinal Ave

City: McAllen | State: TX | Zip Code: 78504

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 09 / Y Y Y Y 2017

Transaction ID : 8774913

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Heusch, Wendy, L, , DO

Mailing Address 13102 127th St Ct E

City: Puyallup | State: WA | Zip Code: 98374

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rainier Orthopedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 09 / Y Y Y Y 2017

Transaction ID : 8774915

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hsu, Joseph, R, , MD

Mailing Address 2816 Hedgewyk Pl

City: Charlotte | State: NC | Zip Code: 28211

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 09 / Y Y Y Y 2017

Transaction ID : 8775312

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lintecum, Neal, D, , MD

Mailing Address 789 N 1500 Road

City: Lawrence | State: KS | Zip Code: 66049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 08 / D D 10 / Y Y Y Y 2017

Transaction ID : 8775510

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1350.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
De Campos, Juliet, M, , MD

Mailing Address 3400 Oakmont Drive

City: Pensacola | State: FL | Zip Code: 32503

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Andrews Institute Baptist Healthcare

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 08 / 10 / 2017

Transaction ID : 8778460

Amount of Each Receipt this Period: 200.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DiRaimondo, Joseph, C, , MD

Mailing Address 1636 Miriam Rd

City: Manitowoc | State: WI | Zip Code: 54220-4039

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Retired

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 10 / 2017

Transaction ID : 8778705

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kamps, Bryan, Scott, , MD

Mailing Address 3741 Monarch Dr NE

City: Grand Rapids | State: MI | Zip Code: 49525

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spectrum Health Medical Group

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 08 / 10 / 2017

Transaction ID : 8778708

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Badia, Alejandro, , , MD

Mailing Address 3650 NW 82nd Ave Ste 103

City: Doral | State: FL | Zip Code: 33166

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Badia Hand to Shoulder Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8779435

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Aversa, John, M, , MD

Mailing Address 2408 Whitney Ave

City: Hamden | State: CT | Zip Code: 06518-3209

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Connecticut Orthopaedic Specialist
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8780545

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Miller, Rodney, Alan, , MD

Mailing Address 1776 W Highland Ave

City: Wooster | State: OH | Zip Code: 44691-9070

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Wooster Orthopaedic & Sports Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8780546

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mahon, John, H, , MD

Mailing Address 8602 N Cardinal Dr

City: Phoenix | State: AZ | Zip Code: 85028

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Retired
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8780556

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hiramoto, Harlan, E, , MD

Mailing Address 9 Potterstown Rd

City: Lebanon | State: NJ | Zip Code: 08833

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hiramoto Ortho & Sports Med PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8780559

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Myung, Karen, Sookyung, , MD

Mailing Address 1224 North Park Avenue

City: Indianapolis | State: IN | Zip Code: 46202

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Indiana University Health Physicians
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8780572

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gilmer, Peter, W, , MD

Mailing Address 3211 Moore's Mill Rd

City: Rougemont | State: NC | Zip Code: 27572

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Emerge Ortho
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 11 / 2017
Transaction ID : 8780573

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lachiewicz, Paul, F, , MD

Mailing Address 417 Lyons Rd

City: Chapel Hill | State: NC | Zip Code: 27514

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 11 / 2017
Transaction ID : 8780574

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shafer, James, S, , MD

Mailing Address 20451 Rancho La Floresta Rd

City: Covina | State: CA | Zip Code: 91724

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 11 / 2017
Transaction ID : 8780576

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 13 / 2017
Transaction ID : 8780818

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hussain, Suleman, M, , MD

Mailing Address 2300 53rd Street, Suite #100

City: Bettendorf | State: IA | Zip Code: 52804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 14 / 2017
Transaction ID : 8780837

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Matthew, R, , MD

Mailing Address 920 Avenue B

City: Marrero | State: LA | Zip Code: 70072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 08 / 14 / 2017
Transaction ID : 8780839

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Abrutyn, David, A, , MD

Mailing Address 20 Pitney Court

City: Basking Ridge | State: NJ | Zip Code: 07920

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 14 / 2017
Transaction ID : 8780840

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pahl, Douglas, W, , MD

Mailing Address 6500-1 Green Island Drive

City: Columbus | State: GA | Zip Code: 31904

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Jack Hughston Memorial Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 14 / 2017
Transaction ID : 8781572

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Seaworth, Christine, Marie, , MD

Mailing Address 638 N Wright Rd

City: Alcoa | State: TN | Zip Code: 37701

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopaedic Surgeons
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 15 / 2017
Transaction ID : 8781933

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linschoten, Niels, J, , MD

Mailing Address 11428 Center Court Blvd

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 08 / 15 / 2017
Transaction ID : 8782120

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Gregory, K, , MD

Mailing Address 288 Groveland St

City: Haverhill | State: MA | Zip Code: 01830-6669

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Associates In Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 15 / 2017
Transaction ID : 8782123

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Trawick, Roy, Hallum, , MD

Mailing Address 47 Lone Hollow

City: Sandy | State: UT | Zip Code: 84092

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 15 / 2017
Transaction ID : 8782130

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pinto, Mark, C, , MD

Mailing Address 1382 Waterways Dr

City: Ann Arbor | State: MI | Zip Code: 48108

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 16 / 2017
Transaction ID : 8782138

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Matthew, J, , MD

Mailing Address 14912 Chopine Pass

City: Roanoke | State: IN | Zip Code: 46783-9308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Hospital of Lutheran He
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 08 / 16 / 2017
Transaction ID : 8782139

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Walker, John, Hollis, , MD

Mailing Address 4715 Whitesburg Dr

City: Huntsville | State: AL | Zip Code: 35802

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 16 / 2017
Transaction ID : 8782988

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1335.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carlson, William, E, , MD

Mailing Address 3 SE Tuscan Lane

City: Stuart | State: FL | Zip Code: 34996

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): South Florida Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: M M 08 / D D 17 / Y Y Y Y 2017

Transaction ID : 8783171

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayden, Shawn, A, , MD

Mailing Address 5124 Marble Falls Ln

City: Plano | State: TX | Zip Code: 75093-7545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 17 / Y Y Y Y 2017

Transaction ID : 8783173

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westin, George, W, , MD

Mailing Address 2488 N California St

City: Stockton | State: CA | Zip Code: 95204

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 16 / Y Y Y Y 2017

Transaction ID : 8783646

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hudgens, Russell, A, , MD

Mailing Address 3610 Springhill Memorial Dr N

City: Mobile | State: AL | Zip Code: 36608

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alabama Ortho Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 16 / Y Y Y Y 2017

Transaction ID : 8783647

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Luzi, Frank, A, , Jr, MD

Mailing Address 9660 Rocky Pt

City: Clarence | State: NY | Zip Code: 14031-1588

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Northtown Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 16 / Y Y Y Y 2017

Transaction ID : 8783649

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Goldberg, Tyler, D, , MD

Mailing Address 6803 W Courtyard Dr

City: Austin | State: TX | Zip Code: 78730

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Texas Orthopedics Sports and Rehabilit
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 16 / Y Y Y Y 2017

Transaction ID : 8783657

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Charoglu, Constantine, , , MD

Mailing Address 12 Waterford Drive

City: Hattiesburg | State: MS | Zip Code: 39402-2927

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southern Bone & Joint Specialists Inc

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 16 / 2017

Transaction ID : 8783664

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Good, Robert, P, , MD

Mailing Address 8 Steeplechase Ln

City: Malvern | State: PA | Zip Code: 19355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rothman Institute

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 16 / 2017

Transaction ID : 8783665

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Veith, Robert, Gordon, , MD

Mailing Address 8444 Midland Rd

City: Medina | State: WA | Zip Code: 98039-5336

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 16 / 2017

Transaction ID : 8783667

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parsley, Brian, S, , MD

Mailing Address 5420 West Loop South, Ste 2400

City: Bellaire | State: TX | Zip Code: 77401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTHealth Physicians
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 04 / Y Y Y Y 2017

Transaction ID : 8783687

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vessely, Michael, B, , MD

Mailing Address 522 Second St

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Willamette Valley Medical Center-
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 03 / Y Y Y Y 2017

Transaction ID : 8783688

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baumgarten, Thomas, E, , MD

Mailing Address 115 Ridgeland Dr

City: Greenville | State: SC | Zip Code: 29601

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Piedmont Ortho Assoc
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 07 / Y Y Y Y 2017

Transaction ID : 8783689

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheehan, John, P, , MD

Mailing Address 6621 Cuming St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Boys Town
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 07 / Y Y Y Y 2017

Transaction ID : 8783691

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shrock, Kevin, B, , MD

Mailing Address 1414 SE 3rd Ave

City: Fort Lauderdale | State: FL | Zip Code: 33316

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 08 / Y Y Y Y 2017

Transaction ID : 8783692

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cain, E, Lyle, , Jr, MD

Mailing Address 805 St Vincent's Dr Ste 100

City: Birmingham | State: AL | Zip Code: 35205

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Andrews Sprts Med & Ortho Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8783693

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ehmke, Thomas, , , DO

Mailing Address 688 Cedar Crossings Dr

City: New Lenox | State: IL | Zip Code: 60451

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Parkview Orthopedic Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt: M M 08 / D D 11 / Y Y Y Y 2017

Transaction ID : 8783695

Amount of Each Receipt this Period: 501.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Szczech, Bartlomiej, , , MD

Mailing Address 89 Intervale Way

City: Lake Placid | State: NY | Zip Code: 12946

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Joseph's Hospital Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 08 / D D 14 / Y Y Y Y 2017

Transaction ID : 8783697

Amount of Each Receipt this Period: 150.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Albert, Todd, J, , MD

Mailing Address 535 E 70th St Rm 836W

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hospital for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M 08 / D D 18 / Y Y Y Y 2017

Transaction ID : 8783737

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1651.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raut, Sourendra, Sean, , MD

Mailing Address 6020 Falls Landing Drive

City: Cumming | State: GA | Zip Code: 30040

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 18 / 2017
Transaction ID : 8783738

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Napoli, David, C, , MD

Mailing Address 107 Bent Creek Preserve Rd

City: Asheville | State: NC | Zip Code: 28806

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 08 / 18 / 2017
Transaction ID : 8783739

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lepse, Peter, S, , MD

Mailing Address 3531 Lincolnshire Rd

City: Topeka | State: KS | Zip Code: 66614

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Stormont Vail Health Care
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 18 / 2017
Transaction ID : 8815322

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fakharzadeh, Frederick, F, , MD

Mailing Address 829 Ellis Place

City: Oradell | State: NJ | Zip Code: 07649

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 18 / 2017
Transaction ID : 8815324

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russo, Vincent, J, , MD

Mailing Address 10290 N 92nd St Ste 103

City: Scottsdale | State: AZ | Zip Code: 85258-4508

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 18 / 2017
Transaction ID : 8815328

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Webb, William, F, , MD

Mailing Address 135 F Country Center Dr #251

City: Pagosa Springs | State: CO | Zip Code: 81147

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Pagosa Springs Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 18 / 2017
Transaction ID : 8815329

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Connors, Nicholas, John, , MD

Mailing Address 123 Creek Drive

City: Port Charlotte | State: FL | Zip Code: 33952-9112

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 18 / Y Y Y Y 2017

Transaction ID : 8815330

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chu, Benjamin, I, , MD

Mailing Address 2298 Weigner Road

City: Lansdale | State: PA | Zip Code: 19446

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rothman Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: M M 08 / D D 18 / Y Y Y Y 2017

Transaction ID : 8815331

Amount of Each Receipt this Period: 350.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Krause, John, O, , MD

Mailing Address 14 Roclare Ln

City: St Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Center of St. Louis
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 18 / Y Y Y Y 2017

Transaction ID : 8815333

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2350.00

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)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Haronian, Edwin, , , MD

Mailing Address 2586 Casiano Rd

City: Los Angeles | State: CA | Zip Code: 90077

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Synapse Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 18 / Y Y Y Y 2017

Transaction ID : 8815338

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gross, Thomas, P, , MD

Mailing Address 116 Southlake Road

City: Columbia | State: SC | Zip Code: 29223

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 18 / Y Y Y Y 2017

Transaction ID : 8815377

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shah, Roshan, P, , MD, JD

Mailing Address 610 West 110th Street
Apt 3E

City: New York | State: NY | Zip Code: 10025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Columbia University Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 19 / Y Y Y Y 2017

Transaction ID : 8815389

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wint, Jeffrey, C, , MD

Mailing Address Hand Center of Western Mass
3550 Main St Ste 204

City: Springfield | State: MA | Zip Code: 01107-1708

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 19 / Y Y Y Y 2017

Transaction ID : 8815390

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coles, Robert, E, , MD

Mailing Address 201 Lands End Rd

City: Morehead City | State: NC | Zip Code: 28557

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Center For Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 19 / Y Y Y Y 2017

Transaction ID : 8815391

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooper, Scott, Snow, , MD

Mailing Address 407 NW A St

City: Bentonville | State: AR | Zip Code: 72712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 20 / Y Y Y Y 2017

Transaction ID : 8817528

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Truumees, Eeric, , , MD

Mailing Address 1508 Windsor Rd

City: Austin | State: TX | Zip Code: 78703

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 20 / Y Y Y Y 2017

Transaction ID : 8817531

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Levy, Jonathan, Chad, , MD

Mailing Address 51 Compass Ln

City: Ft Lauderdale | State: FL | Zip Code: 33308-2009

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8818027

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, David, R, , MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819137

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2085.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stoeckl, Andrew, , , MD

Mailing Address 90 Fairlawn Dr

City: Amherst | State: NY | Zip Code: 14226

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 666.64

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819140

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chapman, Cary, B, , MD

Mailing Address 51 Flagg Court

City: Staten Island | State: NY | Zip Code: 10304

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819143

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannada, Lisa, K, , MD

Mailing Address 12872 Willow Pond Court

City: Saint Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Louis Univ School of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819157

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 251.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swenning, Todd, Allen, , MD

Mailing Address 41970 Rancho Manana Lane

City: Rancho Mirage | State: CA | Zip Code: 92270

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Institute of Clinical Orthopedics & Ne
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 08 / 21 / 2017
Transaction ID : 8819158

Amount of Each Receipt this Period: 90.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Greenky, Brett, B, , MD

Mailing Address 4115 N Medical Center Dr

City: Fayetteville | State: NY | Zip Code: 13066-6636

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Northeast Medical
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 21 / 2017
Transaction ID : 8819170

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wright, Kevin, Earl, , MD

Mailing Address 303 East 33rd Street
Apt. 11D

City: New York | State: NY | Zip Code: 10016

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 438.00

Date of Receipt: 08 / 21 / 2017
Transaction ID : 8819171

Amount of Each Receipt this Period: 438.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 778.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Morris, C, Michael, , MD

Mailing Address 2606 Boddie Pl

City: Duluth | State: GA | Zip Code: 30097

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819172

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Henrichsen, Robert, K, , MD

Mailing Address 13000 Big Sky Pl
Gate Code #7548

City: Auburn | State: CA | Zip Code: 95602

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819181

Amount of Each Receipt this Period: 300.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allsing, Steven, R, , MD

Mailing Address 4419 Mayapan Ln

City: La Mesa | State: CA | Zip Code: 91941

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819188

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lawson, Rodolfo, E, , MD

Mailing Address 7431 Monaco St

City: Coral Gables | State: FL | Zip Code: 33143

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8819193

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mansfield, David, J, , MD

Mailing Address 773 Azalea Pl

City: El Paso | State: TX | Zip Code: 79922

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): El Paso Orthopaedic Surgery Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 922.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2017

Transaction ID : 8819678

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCulloch, Patrick, T, , MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Ortho & Rehab
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2017

Transaction ID : 8819679

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
More, Robert, Cameron, , MD

Mailing Address 8100 Wescott Drive
Suite 101

City: Flemington | State: NJ | Zip Code: 08822

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hunterdon Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2017

Transaction ID : 8819681

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bear, Brian, Jeffrey, , MD

Mailing Address 324 Roxbury Rd

City: Rockford | State: IL | Zip Code: 61107

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2017

Transaction ID : 8819682

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayter, Ronald, G, , MD

Mailing Address 2146 Camden Way

City: Clearwater | State: FL | Zip Code: 33759

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2017

Transaction ID : 8819683

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eckrich, Stephen, G J, , MD

Mailing Address 5511 Shooting Star Trail

City: Rapid City | State: SD | Zip Code: 57702

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 584.50

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8820122

Amount of Each Receipt this Period: 83.50

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Navarro, Ronald, Anthony, , MD

Mailing Address 18 Wide Loop Rd

City: Rolling Hills | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente South Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8820123

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scales, Darrell, Kevin, , MD

Mailing Address 2000 Tee Dr

City: Braselton | State: GA | Zip Code: 30517-4078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8820124

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 267.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lang, Gerald, J, , MD

Mailing Address 1309 Redan Drive

City: Verona | State: WI | Zip Code: 53593

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Wisconsin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 23 / 2017
Transaction ID : 8820125

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pavlatos, Christ, J, , MD, MBA

Mailing Address 1301 North Dearborn Unit 804

City: Chicago | State: IL | Zip Code: 60610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt: 08 / 23 / 2017
Transaction ID : 8820126

Amount of Each Receipt this Period: 41.67

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jackson, Jeffrey, D, , MD

Mailing Address 5150 Alvera Dr

City: Holladay | State: UT | Zip Code: 84117

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Salt Lake Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 08 / 24 / 2017
Transaction ID : 8821657

Amount of Each Receipt this Period: 300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 591.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stapor, David, J, , MD

Mailing Address 2076 Hycroft Dr

City: Pittsburgh | State: PA | Zip Code: 15241

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 24 / Y Y Y Y 2017

Transaction ID : 8821658

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartsock, Langdon, A, , MD

Mailing Address 188 Tradd Street

City: Charleston | State: SC | Zip Code: 29401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Med Univ of SC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 24 / Y Y Y Y 2017

Transaction ID : 8821659

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Torres, Daniel, , , MD

Mailing Address 1488 Shelburne Ct

City: Allentown | State: PA | Zip Code: 18104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Texas Med Branch
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: M M 08 / D D 24 / Y Y Y Y 2017

Transaction ID : 8821660

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Malone, Stephen, L, , MD

Mailing Address 923 Westover Rd

City: Wilmington | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopaedic Spine Ctr PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt: 08 / 24 / 2017
Transaction ID : 8821661

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gerlinger, COL. (ret) Tad, L, , MD

Mailing Address 596 Provident Ave

City: Winnetka | State: IL | Zip Code: 60093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midwest Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 24 / 2017
Transaction ID : 8821662

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Purtill, James, J, , MD

Mailing Address 651 Darby Paoli Rd

City: Villanova | State: PA | Zip Code: 19085

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rothman Orthopaedic Specialty Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 08 / 23 / 2017
Transaction ID : 8821976

Amount of Each Receipt this Period: 1500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1850.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Meadows, Gilbert, R, , MD

Mailing Address 807 Contour Dr

City: San Antonio | State: TX | Zip Code: 78212

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8821979

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stokel, Edward, A, , MD

Mailing Address PO Box 616

City: Petoskey | State: MI | Zip Code: 49770-0616

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8821984

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Petty, R, William, , MD

Mailing Address 6717 NE 48th Lane

City: Gainesville | State: FL | Zip Code: 32653

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Exactech Inc.
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822022

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dines, Joshua, S, , MD

Mailing Address 39 Kings Lane

City: Southampton | State: NY | Zip Code: 11968-2802

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): David Dines MD PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822023

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thomas, Frank, V, , MD

Mailing Address 8 Chilton Lane

City: Saint Louis | State: MO | Zip Code: 63141

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822024

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Southworth, Stephen, R, , MD

Mailing Address 1080 Quail Creek

City: Tupelo | State: MS | Zip Code: 38801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822025

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Strauss, Eric, Jason, , MD

Mailing Address 85 Penn Road

City: Scarsdale | State: NY | Zip Code: 10583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): New York University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822026

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cummins, Craig, Anthony, , MD

Mailing Address 741 Spruce Rd

City: Barrington | State: IL | Zip Code: 60010

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IL Bone & Joint Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822049

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bourne, Michael, H, , MD

Mailing Address 1160 E 3900 S Ste 5000

City: Salt Lake City | State: UT | Zip Code: 84124-1202

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822050

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Glassman, Steven, D, , MD

Mailing Address 12345 Osage Road

City: Louisville | State: KY | Zip Code: 40232

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Norton Healthcare
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822052

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Popa, Anca, , , MD

Mailing Address 71 Norwood Ave

City: Montclair | State: NJ | Zip Code: 07043

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8822054

Amount of Each Receipt this Period: 300.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wills, Christopher, A, , MD

Mailing Address 11622 Vista Mar

City: North Tustin | State: CA | Zip Code: 92705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8822160

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1384.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fernandez, Rafael, M, , MD

Mailing Address 100 State Ave

City: Faribault | State: MN | Zip Code: 55021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8822161

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hire, Justin, , , MD

Mailing Address 205 Tremont Drive

City: Waynesville | State: MO | Zip Code: 65583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8822162

Amount of Each Receipt this Period: 42.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Espinoza, Luis, M, , MD

Mailing Address 5 Savannah Ridge Lane

City: Metairie | State: LA | Zip Code: 70001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 675.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8822163

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 227.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mumford, Joseph, E, , MD

Mailing Address 3110 SW Briarwood Circle

City: Topeka | State: KS | Zip Code: 66611

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Stormont Vail Healthcare
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8823040

Amount of Each Receipt this Period: 375.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Papas, Spiro, N, , MD

Mailing Address 200 Delafield Rd Ste 1040

City: Pittsburgh | State: PA | Zip Code: 15215

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8823045

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Evans, Bruce, G, , MD

Mailing Address 1160 E 3900 S Ste 4000

City: Salt Lake City | State: UT | Zip Code: 84124-1202

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 25 / Y Y Y Y 2017

Transaction ID : 8823047

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1125.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LeGrand, Alexander, Benton, , MD

Mailing Address 111 Star Ridge Rd

City: Bozeman | State: MT | Zip Code: 59715

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Bridger Orthopedics and Sports Medicin

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 25 / 2017

Transaction ID : 8823067

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Callahan, Bert, C, , MD

Mailing Address 511 N Center St

City: Beaver Dam | State: WI | Zip Code: 53916-3071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fond Du Lac Regional Clinic

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 26 / 2017

Transaction ID : 8823079

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kennedy, E, Jeff, , MD

Mailing Address 235 Johnstone Dr

City: Madison | State: MS | Zip Code: 39110-7686

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 950.00

Date of Receipt: 08 / 26 / 2017

Transaction ID : 8823080

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bries, Andrew, David, , MD

Mailing Address 3126 Westminster Rd

City: Bettendorf | State: IA | Zip Code: 52722

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 27 / 2017
Transaction ID : 8823081

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kirol, Bernard, G, , MD

Mailing Address 106 Buckthorn Circle

City: Elgin | State: SC | Zip Code: 29045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics, PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 08 / 27 / 2017
Transaction ID : 8823082

Amount of Each Receipt this Period: 75.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gray, F, Scott, , MD

Mailing Address 25 Olmstead Lane

City: Ridgefield | State: CT | Zip Code: 06877

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Connecticut Family Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 28 / 2017
Transaction ID : 8823108

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 575.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giammattei, Frank, P, , MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Premier Orthopaedic Associates

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 28 / 2017

Transaction ID : 8823109

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mitros, Stephen, F, , MD

Mailing Address 51045 Erin Glen Dr

City: Granger | State: IN | Zip Code: 46530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mitros Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 08 / 28 / 2017

Transaction ID : 8823110

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gary, Joshua, Layne, , MD

Mailing Address 4226 Byron

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 28 / 2017

Transaction ID : 8823111

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Easley, Mark, E, , MD

Mailing Address Duke Medicine
4709 Creekstone Drive

City: Durham | State: NC | Zip Code: 27703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8823112

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carolan, Gregory, Francis, , MD

Mailing Address 1806 Meadow Ridge Ct

City: Bethlehem | State: PA | Zip Code: 18015

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Luke's Ortho Surg Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 872.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8823113

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, W, Stanley, , MD

Mailing Address 108 Valerie Dr

City: Lafayette | State: LA | Zip Code: 70508-6008

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8823114

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kelly, James, D, , II, MD

Mailing Address 2351 Clay St Ste 510

City: San Francisco | State: CA | Zip Code: 94115

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8823116

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raikin, Steven, M, , MD

Mailing Address 221 Merion Rd

City: Merion Station | State: PA | Zip Code: 19066

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rothman Orthopaedic Specialty Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8823856

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vener, Michael, , , MD

Mailing Address 668 N Lake Dr

City: Watertown | State: SD | Zip Code: 57201

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Glacial Lakes Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8823863

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
L'Insalata, John, C, , MD

Mailing Address 495 Wooddale Ave

City: Staten Island | State: NY | Zip Code: 10301

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Surgical Consultant
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 28 / 2017
Transaction ID : 8823864

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McKay, Richard, F, , MD

Mailing Address 3203 S Ong

City: Amarillo | State: TX | Zip Code: 79109

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 28 / 2017
Transaction ID : 8823892

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Adolph, Carl, Michael, , Jr, MD

Mailing Address 1118 Persimmon Dr

City: Lancaster | State: PA | Zip Code: 17601

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Associates of Lancaster
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 29 / 2017
Transaction ID : 8825254

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rud, Paul, T, , MD

Mailing Address 15684 Birchwood Ln

City: Brainerd | State: MN | Zip Code: 56401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 29 / Y Y Y Y 2017

Transaction ID : 8825257

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gobezie, Reuben, , , MD

Mailing Address 1700 E Putnam Ave
Suite 307

City: Old Greenwich | State: CT | Zip Code: 06870-1380

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 08 / D D 30 / Y Y Y Y 2017

Transaction ID : 8825263

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Duffett, Raymond, S, , MD

Mailing Address 1335 Belmont Ave

City: Youngstown | State: OH | Zip Code: 44504-1103

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Surgery Center of Southwoods
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 08 / D D 29 / Y Y Y Y 2017

Transaction ID : 8825279

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stowell, Michael, T, , MD

Mailing Address 19254 Jamestown Drive

City: Hagerstown | State: MD | Zip Code: 21742

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Center for Advanced Orthopedic - Parkw
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 08 / 29 / 2017
Transaction ID : 8825281

Amount of Each Receipt this Period: 375.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kofoed, John, Charles, , MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sutter Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 08 / 29 / 2017
Transaction ID : 8825282

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tanner, Edward, C, , MD

Mailing Address 1445 Portland Ave Ste 210

City: Rochester | State: NY | Zip Code: 14621

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 30 / 2017
Transaction ID : 8825829

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 959.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ritchie, William, L, , IV, MD

Mailing Address 201 Cedar SE Ste 6600

City: Albuquerque | State: NM | Zip Code: 87106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 16 / Y Y Y Y 2017

Transaction ID : 8825878

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bailey, James, R, , MD

Mailing Address 10439 Blue Summit Court

City: San Diego | State: CA | Zip Code: 92131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 08 / D D 17 / Y Y Y Y 2017

Transaction ID : 8825883

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Drumm, Joshua, E, , DO

Mailing Address 212 E Central Ave
Suite 245

City: Spokane | State: WA | Zip Code: 99208

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Providence
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 08 / D D 21 / Y Y Y Y 2017

Transaction ID : 8825886

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jiranek, William, A, , MD

Mailing Address 4066 Old River Trail

City: Powhatan | State: VA | Zip Code: 23139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2017

Transaction ID : 8825893

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Besh, Basil, R, , MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): FORM Hand, Wrist & Elbow Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 23 / Y Y Y Y 2017

Transaction ID : 8825897

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damalas, Dino, , ,

Mailing Address 9400 Higgins Rd

City: Rosemont | State: IL | Zip Code: 60018-4974

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): AAOS
Occupation (for Individual): Chief Operations Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: M M 08 / D D 28 / Y Y Y Y 2017

Transaction ID : 8825905

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stephenson, John, Michael, , MD

Mailing Address 23 Hickory Creek Dr

City: Little Rock | State: AR | Zip Code: 72212-2509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Arkansas For Medical Sci
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 08 / 28 / 2017
Transaction ID : 8825908

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iorio, Richard, , , MD

Mailing Address 1 Indian Hill Road

City: New Rochelle | State: NY | Zip Code: 10804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 08 / 28 / 2017
Transaction ID : 8825909

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mejia, Alfonso, , , MD, MPH

Mailing Address 5332 South Shore Drive

City: Chicago | State: IL | Zip Code: 60615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Association of Orthopedic Sur
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 08 / 28 / 2017
Transaction ID : 8825910

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Epps, Howard, R, , MD

Mailing Address 1936 Wroxton Road

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Baylor College of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 08 / D D 30 / Y Y Y Y 2017

Transaction ID : 8825911

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waddell, Bradford, Sutton, , MD

Mailing Address 235 North Regent St.

City: Port Chester | State: NY | Zip Code: 10573

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 08 / D D 30 / Y Y Y Y 2017

Transaction ID : 8825913

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sherbondy, Paul, Strawn, , MD

Mailing Address 507 Beaumont Drive

City: State College | State: PA | Zip Code: 16801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8826024

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rungee, James, L, , MD

Mailing Address 2802 Pavilion Pl

City: Murfreesboro | State: TN | Zip Code: 37129

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tennessee Orthopedic Alliance
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8826025

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Early, John, S, , MD

Mailing Address 8210 Walnut Hill Ln Ste 130

City: Dallas | State: TX | Zip Code: 75231

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Texas Orthopaedic Associates
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8826027

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kwong, Louis, M, , MD

Mailing Address PO Box 422
1000 W Carson St

City: Torrance | State: CA | Zip Code: 90509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 09 / D D 02 / Y Y Y Y 2017

Transaction ID : 8827528

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1350.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uppal, Renny, , , MD

Mailing Address 1730 Sharpe Hill Circle

City: Reno | State: NV | Zip Code: 89523-3924

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 02 / 2017
Transaction ID : 8827529

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brophy, Robert, H, , MD

Mailing Address 7 Maryhill Dr

City: St Louis | State: MO | Zip Code: 63124

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Washington University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 02 / 2017
Transaction ID : 8827530

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stuart, Kyle, David, , MD

Mailing Address 1810 Tucker St

City: Dallas | State: TX | Zip Code: 75214

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sports Medicine Clinic of North Texas
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 02 / 2017
Transaction ID : 8827532

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wyatt, Ronald, W B, , MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 09 / 03 / 2017

Transaction ID : 8827750

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Krueger, Chad, A, , MD

Mailing Address 208 Sundew Court

City: Southern Pines | State: NC | Zip Code: 28387

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 03 / 2017

Transaction ID : 8827751

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hinchey, John, William, , MD

Mailing Address 409 Normandy Ave

City: San Antonio | State: TX | Zip Code: 78209

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 04 / 2017

Transaction ID : 8827752

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Santore, Richard, F, , MD

Mailing Address PO Box 7016

City: Rancho Santa Fe | State: CA | Zip Code: 92067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sharp Healthcare Hip Preservation Cent

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 04 / 2017

Transaction ID : 8827753

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mosley, Emmett, Wayne, , MD

Mailing Address 1309 Upland Crest Ct

City: Gulf Breeze | State: FL | Zip Code: 32563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 09 / 04 / 2017

Transaction ID : 8827754

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allard, Mark, Michael, , MD

Mailing Address 3010 Cortney Circle

City: Siloam Springs | State: AR | Zip Code: 72761

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 05 / 2017

Transaction ID : 8829174

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Daniel, Richard, , MD

Mailing Address 654 W Sawgrass Trail

City: Dakota Dunes | State: SD | Zip Code: 57049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CNOS
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 09 / 05 / 2017
Transaction ID : 8829175

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kelbel, J, Michael, , MD

Mailing Address 2425 Topswood

City: South Bend | State: IN | Zip Code: 46614

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 05 / 2017
Transaction ID : 8829197

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Farber, Daniel, C, , MD

Mailing Address 300 Fairhill Rd

City: Wynnewood | State: PA | Zip Code: 19096-1804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Penn Medicine Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 06 / 2017
Transaction ID : 8830324

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Green, Daniel, William, , MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt: M M 09 / D D 07 / Y Y Y Y 2017

Transaction ID : 8830918

Amount of Each Receipt this Period: 175.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garner, Richard, W, , MD

Mailing Address 7201 E Chester Heights Circle

City: Anchorage | State: AK | Zip Code: 99504-3563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: M M 09 / D D 07 / Y Y Y Y 2017

Transaction ID : 8830919

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hildebrand, Randall, , , MD

Mailing Address 1711 Lincoln St

City: Great Bend | State: KS | Zip Code: 67530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 07 / Y Y Y Y 2017

Transaction ID : 8830920

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tyndall, William, A, , MD

Mailing Address 123 Brittany Ln

City: Hollidaysburg | State: PA | Zip Code: 16648

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 836.00

Date of Receipt: M M 09 / D D 07 / Y Y Y Y 2017

Transaction ID : 8830921

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Joel, D, , MD

Mailing Address Tucson Shoulder Elbow & Hand
3972 N Campbell Ave

City: Tucson | State: AZ | Zip Code: 85719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tucson Shoulder Elbow & Hand
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 07 / Y Y Y Y 2017

Transaction ID : 8830922

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clain, Michael, R, , MD

Mailing Address 9 Indian Head Rd

City: Riverside | State: CT | Zip Code: 06878

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 09 / Y Y Y Y 2017

Transaction ID : 8834321

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rawlings, John, M, , MD

Mailing Address 89 Whitaker Way N

City: Richmond Hill | State: GA | Zip Code: 31324

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Madigan Healthcare System
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: M M 09 / D D 09 / Y Y Y Y 2017

Transaction ID : 8834323

Amount of Each Receipt this Period: 25.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Braaton, Paul, J, , MD

Mailing Address 1335 Coffee Rd Ste 100

City: Modesto | State: CA | Zip Code: 95355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 822.00

Date of Receipt: M M 09 / D D 09 / Y Y Y Y 2017

Transaction ID : 8834324

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lintecum, Neal, D, , MD

Mailing Address 789 N 1500 Road

City: Lawrence | State: KS | Zip Code: 66049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 10 / Y Y Y Y 2017

Transaction ID : 8834325

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 209.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ellis, Thomas, J, , MD

Mailing Address 5190 Harlem Road

City: New Albany | State: OH | Zip Code: 43054

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 10 / Y Y Y Y 2017

Transaction ID : 8834327

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Badia, Alejandro, , , MD

Mailing Address 3650 NW 82nd Ave Ste 103

City: Doral | State: FL | Zip Code: 33166

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Badia Hand to Shoulder Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 11 / Y Y Y Y 2017

Transaction ID : 8834332

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brokaw, David, , , MD

Mailing Address 8450 Northwest Blvd

City: Indianapolis | State: IN | Zip Code: 46278-1381

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834379

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coscia, Michael, F, , MD

Mailing Address 7200 Hull Rd

City: Zionsville | State: IN | Zip Code: 46077

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834380

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Crichlow, Renn, J, , MD

Mailing Address 12273 Bridgewater Rd

City: Indianapolis | State: IN | Zip Code: 46256

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834381

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dietz, John, W, , MD

Mailing Address 1212 Emerald Viking Court

City: Westfield | State: IN | Zip Code: 46074

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834382

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Farr, Jack, , , II, MD

Mailing Address 5287 N 400 W

City: Bargersville | State: IN | Zip Code: 46106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834383

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fisher, David, A, , MD

Mailing Address 351 Breakwater Dr

City: Fishers | State: IN | Zip Code: 46037

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834386

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gudeman, Scott, D, , MD

Mailing Address 3132 Golfveiw Dr

City: Greenwood | State: IN | Zip Code: 46143

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy South
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834387

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hellman, Edward, J, , MD

Mailing Address 12715 Norfolk Ln

City: Carmel | State: IN | Zip Code: 46032

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834388

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kaehr, David, M, , MD

Mailing Address 3942 Oakleaf Dr

City: Zionsville | State: IN | Zip Code: 46077

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834389

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kayes, Kosmas, J, , MD

Mailing Address 4681 St John Circle

City: Zionsville | State: IN | Zip Code: 46077

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834390

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kendall, Corey, B, , MD

Mailing Address 10060 Sanctuary Dr

City: Brownsburg | State: IN | Zip Code: 46112-7624

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834391

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lavery, Matthew, Ryan, , MD

Mailing Address 4950 N Meridian St

City: Indianapolis | State: IN | Zip Code: 46208-2622

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834392

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maar, Dean, C, , MD

Mailing Address 9250 Willowrun Dr

City: Indianapolis | State: IN | Zip Code: 46260

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834393

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schwartz, David, G, , MD

Mailing Address 8450 Northwest Blvd

City: Indianapolis | State: IN | Zip Code: 46278

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834394

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Soldatis, Jeffery, J, , MD

Mailing Address 7535 W 96th St

City: Zionsville | State: IN | Zip Code: 46077-8712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834395

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thieken, Michael, Thomas, , MD

Mailing Address 11538 Willow Springs Dr

City: Zionsville | State: IN | Zip Code: 46077

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834397

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weber, Timothy, G, , MD

Mailing Address 8450 Northwest Blvd

City: Indianapolis | State: IN | Zip Code: 46278

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834398

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Woo, Thomas, , , MD

Mailing Address 1260 Innovation Pkwy Ste 100

City: Greenwood | State: IN | Zip Code: 46143

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8834399

Amount of Each Receipt this Period: 800.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baldauf, John, , , MD

Mailing Address 501 Trenier Drive

City: Henderson | State: NV | Zip Code: 89002

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834432

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bassewitz, Hugh, , , MD

Mailing Address 15 Morning Glow Ln

City: Las Vegas | State: NV | Zip Code: 89135-2618

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834433

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dunn, Thomas, , , MD

Mailing Address 2001 Alcova Ridge Dr

City: Las Vegas | State: NV | Zip Code: 89135

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center, LTD

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834434

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fontes, Roger, A, , Jr, MD

Mailing Address #504
1452 W Horizon Ridge Pkwy

City: Henderson | State: NV | Zip Code: 89012

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834437

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fouse, Matthew, Nolan, , MD

Mailing Address 11607 Suburban Rd

City: Las Vegas | State: NV | Zip Code: 89135

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017
Transaction ID : 8834438

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Granata, Jaymes, , , MD

Mailing Address 11295 Winter Cottage Pl

City: Las Vegas | State: NV | Zip Code: 89135-1703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017
Transaction ID : 8834439

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hanson, Chad, M, , MD

Mailing Address 2278 Trafalgar Ct

City: Henderson | State: NV | Zip Code: 89074

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017
Transaction ID : 8834440

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Huff, Lawrence, Richard, , Jr, MD

Mailing Address 3356 Saddlebrook St

City: Las Vegas | State: NV | Zip Code: 89141-3234

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834447

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Daniel, , , MD

Mailing Address 15 Hawk Ridge Dr

City: Las Vegas | State: NV | Zip Code: 89135-7864

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834448

Amount of Each Receipt this Period: 550.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Miao, Michael, , , MD

Mailing Address 9 Wade Hampton Trail

City: Henderson | State: NV | Zip Code: 89052

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center, LTD
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834449

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Perry, Archie, C, , Jr, MD

Mailing Address 9712 Highridge Dr

City: Las Vegas | State: NV | Zip Code: 89134

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017
Transaction ID : 8834450

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raissi, Abdi, , , MD

Mailing Address 2800 E Desert Inn Rd Ste 100

City: Las Vegas | State: NV | Zip Code: 89121

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 08 / 2017
Transaction ID : 8834451

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kang, Parminder, Singh, , MD

Mailing Address 4827 ENCHANTED VIEW ST

City: LAS VEGAS | State: NV | Zip Code: 89149-3503

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017
Transaction ID : 8834454

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tingey, Craig, Thomas, , MD

Mailing Address 512 Canyon Greens Dr

City: Las Vegas | State: NV | Zip Code: 89144-0830

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834455

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Watson, Troy, S, , MD

Mailing Address 75 Kittansett Loop

City: Henderson | State: NV | Zip Code: 89052-6694

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834456

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Winder, Richard, , , MD

Mailing Address 2007 Grafton Ave

City: Henderson | State: NV | Zip Code: 89074-0604

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthpaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834457

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Michael, Lai, , MD

Mailing Address 3111 Bel Air Dr Unit 28 H

City: Las Vegas | State: NV | Zip Code: 89109-1508

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017

Transaction ID : 8834496

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Healey, John, H, , MD, FACS

Mailing Address 1275 York Avenue Suite H-1017

City: New York | State: NY | Zip Code: 10065

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Memorial Sloan Kettering Cancer Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 08 / 2017

Transaction ID : 8834540

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mariorenzi, Louis, J, , MD

Mailing Address 84 Bay View Drive

City: Jamestown | State: RI | Zip Code: 02835

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Associates
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 08 / 2017

Transaction ID : 8834541

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Guse, Cary, M, , MD

Mailing Address 6013 Turtle Bay Pkwy

City: Columbus | State: IN | Zip Code: 47201

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southern IN Orthopedic Group

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2017

Transaction ID : 8834549

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Randolph, Gannon, B, , MD

Mailing Address 9851 Southview Dr

City: Rogers | State: AR | Zip Code: 72756

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopaedic

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 08 / 2017

Transaction ID : 8834552

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hamilton, William, G, , MD

Mailing Address 8299 Glen Cove Ct

City: Alexandria | State: VA | Zip Code: 22308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 08 / 2017

Transaction ID : 8834554

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheinkop, Mitchell, B, , MD

Mailing Address 2328 N Cleveland Ave

City: Chicago | State: IL | Zip Code: 60614

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834556

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bigler, Gregory, T, , MD

Mailing Address 9101 Alta Dr Unit 901

City: Las Vegas | State: NV | Zip Code: 89145-8538

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 08 / Y Y Y Y 2017

Transaction ID : 8834560

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Teuscher, David, , , MD

Mailing Address PO Box 26

City: Paige | State: TX | Zip Code: 78659

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 09 / D D 12 / Y Y Y Y 2017

Transaction ID : 8835219

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Jason, J, , MD

Mailing Address 3300 Timberlake Dr

City: Commerce Township | State: MI | Zip Code: 48390

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Henry Ford Health System
Occupation (for Individual): Orthpeadic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 09 / D D 12 / Y Y Y Y 2017

Transaction ID : 8838329

Amount of Each Receipt this Period: 300.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 13 / Y Y Y Y 2017

Transaction ID : 8838334

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hussain, Suleman, M, , MD

Mailing Address 2300 53rd Street, Suite #100

City: Bettendorf | State: IA | Zip Code: 52804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8839170

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 468.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Matthew, R, , MD

Mailing Address 920 Avenue B

City: Marrero | State: LA | Zip Code: 70072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8839171

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Abrutyn, David, A, , MD

Mailing Address 20 Pitney Court

City: Basking Ridge | State: NJ | Zip Code: 07920

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8839172

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linschoten, Niels, J, , MD

Mailing Address 11428 Center Court Blvd

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 09 / D D 15 / Y Y Y Y 2017

Transaction ID : 8840057

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Matthew, J, , MD

Mailing Address 14912 Chopine Pass

City: Roanoke | State: IN | Zip Code: 46783-9308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Hospital of Lutheran He
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: 09 / 16 / 2017
Transaction ID : 8840964

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayden, Shawn, A, , MD

Mailing Address 5124 Marble Falls Ln

City: Plano | State: TX | Zip Code: 75093-7545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 17 / 2017
Transaction ID : 8841179

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hunt, Stephen, Austin, , MD

Mailing Address 7 Pheasant Run Dr

City: Basking Ridge | State: NJ | Zip Code: 07920

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 17 / 2017
Transaction ID : 8841180

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 435.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Biggs, William, Davis, , MD

Mailing Address 6565 Rookery Rd

City: Fort Collins | State: CO | Zip Code: 80528

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Center of the Rockies

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 17 / Y Y Y Y 2017

Transaction ID : 8841182

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shapiro, James, A, , MD

Mailing Address 7221 3rd Ave

City: Kenosha | State: WI | Zip Code: 53143

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 17 / Y Y Y Y 2017

Transaction ID : 8841185

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raut, Sourendra, Sean, , MD

Mailing Address 6020 Falls Landing Drive

City: Cumming | State: GA | Zip Code: 30040

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 18 / Y Y Y Y 2017

Transaction ID : 8842603

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Napoli, David, C, , MD

Mailing Address 107 Bent Creek Preserve Rd

City: Asheville | State: NC | Zip Code: 28806

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: M M 09 / D D 18 / Y Y Y Y 2017

Transaction ID : 8842604

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pula, David, A, , MD

Mailing Address 16 Evergreen Trail

City: Orchard Park | State: NY | Zip Code: 14127

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 18 / Y Y Y Y 2017

Transaction ID : 8842605

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannon, David, L, , MD

Mailing Address 2639 Fox Hill Circle East

City: Germantown | State: TN | Zip Code: 38139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Campbell Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 284.00

Date of Receipt: M M 09 / D D 13 / Y Y Y Y 2017

Transaction ID : 8842680

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Montgomery, William, Kemp, , MD

Mailing Address 2517 Timber Cove Lane

City: Plano | State: TX | Zip Code: 75093-6141

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 14 / 2017
Transaction ID : 8842749

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Newton, Peter, O, , MD

Mailing Address 3020 Children's Way 4th Floor

City: San Diego | State: CA | Zip Code: 92123-4228

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of San Diego
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 14 / 2017
Transaction ID : 8842750

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tasto, James, P, , MD

Mailing Address 6719 Alvarado Rd Suite 200

City: San Diego | State: CA | Zip Code: 92120-5256

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 14 / 2017
Transaction ID : 8842769

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Matta, Joel, Michael, , MD

Mailing Address 181 W Meadow Dr, Ste 400

City: Vail | State: CO | Zip Code: 81657

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8842770

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thorpe, Michael, A, , MD

Mailing Address 2979 Squalicum Pkwy Ste 203

City: Bellingham | State: WA | Zip Code: 98225-1813

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8842771

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Miller, Lawrence, S, , MD

Mailing Address 50 Indian Spring Rd

City: Media | State: PA | Zip Code: 19063

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Cooper University Hospital
Occupation (for Individual): Orthopaedic Surgoen

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8842773

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kraay, Matthew, J, , MD

Mailing Address 11100 Euclid Ave

City: Cleveland | State: OH | Zip Code: 44106-1736

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ Hosp of Cleveland
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 14 / 2017
Transaction ID : 8842775

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McPherson, Scott, A, , MD

Mailing Address 2908 E 26th St

City: Sioux Falls | State: SD | Zip Code: 57103-4089

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Core Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 14 / 2017
Transaction ID : 8842776

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blotter, Robert, H, , MD

Mailing Address 1414 W Fair Ave Ste 190

City: Marquette | State: MI | Zip Code: 49855-2693

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Center of Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 05 / 2017
Transaction ID : 8842817

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Parsley, Brian, S, , MD

Mailing Address 5420 West Loop South, Ste 2400

City: Bellaire | State: TX | Zip Code: 77401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTHealth Physicians
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 05 / Y Y Y Y 2017

Transaction ID : 8842818

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vessely, Michael, B, , MD

Mailing Address 522 Second St

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Willamette Valley Medical Center-
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 05 / Y Y Y Y 2017

Transaction ID : 8842819

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Killian, John, Thomas, , MD

Mailing Address 314 Sterrett Ave

City: Birmingham | State: AL | Zip Code: 35209

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedics For Kids, PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 09 / D D 06 / Y Y Y Y 2017

Transaction ID : 8842821

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Keeney, James, A, , MD

Mailing Address 1106 Shallow Ridge Circle

City: Columbia | State: MO | Zip Code: 65201

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Missouri Orthopaedic Instit

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 06 / 2017

Transaction ID : 8842822

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheehan, John, P, , MD

Mailing Address 6621 Cuming St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Boys Town

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 06 / 2017

Transaction ID : 8842823

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Granberry, William, M, , MD

Mailing Address 3615 Bellefontaine St

City: Houston | State: TX | Zip Code: 77025-1316

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 07 / 2017

Transaction ID : 8842825

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Armocida, Frank, Michael, , MD

Mailing Address 118 Poplar Hill Lane

City: Greenville | State: SC | Zip Code: 29615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spartanburg Regional
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt: M M 09 / D D 14 / Y Y Y Y 2017

Transaction ID : 8842831

Amount of Each Receipt this Period: 1001.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Duck, Holly, J, , MD

Mailing Address 290 Wimbledon Hills Dr SW

City: Rochester | State: MN | Zip Code: 55902-4164

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mayo Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 15 / Y Y Y Y 2017

Transaction ID : 8842834

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shah, Roshan, P, , MD, JD

Mailing Address 610 West 110th Street
Apt 3E

City: New York | State: NY | Zip Code: 10025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Columbia University Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 19 / Y Y Y Y 2017

Transaction ID : 8842838

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coles, Robert, E, , MD

Mailing Address 201 Lands End Rd

City: Morehead City | State: NC | Zip Code: 28557

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Center For Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 19 / Y Y Y Y 2017

Transaction ID : 8842839

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blue, J, Mark, , MD

Mailing Address 844 Washington Rd Suite 102

City: Westminster | State: MD | Zip Code: 21157-5782

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carroll Orthopaedic Specialists LLC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 19 / Y Y Y Y 2017

Transaction ID : 8843293

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shen, Wen, , , MD

Mailing Address 33 Pond Hills Ct

City: Pleasant Valley | State: NY | Zip Code: 12569

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Associates of Dutchess Coun
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 09 / D D 20 / Y Y Y Y 2017

Transaction ID : 8843295

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Owen, K, Kip, , MD

Mailing Address 5111 N 10th St # 268

City: McAllen | State: TX | Zip Code: 78504

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 20 / 2017
Transaction ID : 8843297

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gulli, Benjamin, , , MD

Mailing Address 3366 Oakdale Avenue North
Suite 103

City: Robbinsdale | State: MN | Zip Code: 55422

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Twin Cities Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 20 / 2017
Transaction ID : 8844281

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, David, R, , MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: 09 / 21 / 2017
Transaction ID : 8844286

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1335.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stoeckl, Andrew, , , MD

Mailing Address 90 Fairlawn Dr

City: Amherst | State: NY | Zip Code: 14226

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 749.97

Date of Receipt: M M 09 / D D 21 / Y Y Y Y 2017

Transaction ID : 8844287

Amount of Each Receipt this Period: 83.33

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chapman, Cary, B, , MD

Mailing Address 51 Flagg Court

City: Staten Island | State: NY | Zip Code: 10304

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 21 / Y Y Y Y 2017

Transaction ID : 8844288

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannada, Lisa, K, , MD

Mailing Address 12872 Willow Pond Court

City: Saint Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Louis Univ School of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 21 / Y Y Y Y 2017

Transaction ID : 8844289

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 251.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swenning, Todd, Allen, , MD

Mailing Address 41970 Rancho Manana Lane

City: Rancho Mirage | State: CA | Zip Code: 92270

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Institute of Clinical Orthopedics & Ne
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt: 09 / 21 / 2017
Transaction ID : 8844290

Amount of Each Receipt this Period: 90.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mansfield, David, J, , MD

Mailing Address 773 Azalea Pl

City: El Paso | State: TX | Zip Code: 79922

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): El Paso Orthopaedic Surgery Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1006.00

Date of Receipt: 09 / 22 / 2017
Transaction ID : 8845026

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCulloch, Patrick, T, , MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Ortho & Rehab
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 22 / 2017
Transaction ID : 8845027

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 258.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
More, Robert, Cameron, , MD

Mailing Address 8100 Wescott Drive
Suite 101

City: Flemington | State: NJ | Zip Code: 08822

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hunterdon Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 22 / Y Y Y Y 2017
Transaction ID : 8845029

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Szczech, Bartlomiej, , , MD

Mailing Address 89 Intervale Way

City: Lake Placid | State: NY | Zip Code: 12946

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Joseph's Hospital Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 09 / D D 22 / Y Y Y Y 2017
Transaction ID : 8849106

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eckrich, Stephen, G J, , MD

Mailing Address 5511 Shooting Star Trail

City: Rapid City | State: SD | Zip Code: 57702

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 668.00

Date of Receipt: M M 09 / D D 23 / Y Y Y Y 2017
Transaction ID : 8849143

Amount of Each Receipt this Period: 83.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 267.50

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Navarro, Ronald, Anthony, , MD

Mailing Address 18 Wide Loop Rd

City: Rolling Hills | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente South Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 09 / D D 23 / Y Y Y Y 2017

Transaction ID : 8849144

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scales, Darrell, Kevin, , MD

Mailing Address 2000 Tee Dr

City: Braselton | State: GA | Zip Code: 30517-4078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 09 / D D 23 / Y Y Y Y 2017

Transaction ID : 8849145

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scolaro, John, Alan, , MD

Mailing Address 91 Shadowbrook

City: Irvine | State: CA | Zip Code: 92604

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UCI Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 09 / D D 23 / Y Y Y Y 2017

Transaction ID : 8849146

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 284.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Daniel, K, , MBA, MD, M

Mailing Address 4964 Akron St

City: Denver | State: CO | Zip Code: 80238

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Washington University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 09 / D D 23 / Y Y Y Y 2017

Transaction ID : 8849147

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pavlatos, Christ, J, , MD, MBA

Mailing Address 1301 North Dearborn Unit 804

City: Chicago | State: IL | Zip Code: 60610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 291.69

Date of Receipt: M M 09 / D D 23 / Y Y Y Y 2017

Transaction ID : 8849148

Amount of Each Receipt this Period: 41.67

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartsock, Langdon, A, , MD

Mailing Address 188 Tradd Street

City: Charleston | State: SC | Zip Code: 29401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Med Univ of SC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 24 / Y Y Y Y 2017

Transaction ID : 8849150

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 375.67

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Torres, Daniel, , , MD

Mailing Address 1488 Shelburne Ct

City: Allentown | State: PA | Zip Code: 18104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Texas Med Branch

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: 09 / 24 / 2017

Transaction ID : 8849151

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Malone, Stephen, L, , MD

Mailing Address 923 Westover Rd

City: Wilmington | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopaedic Spine Ctr PA

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt: 09 / 24 / 2017

Transaction ID : 8849152

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wills, Christopher, A, , MD

Mailing Address 11622 Vista Mar

City: North Tustin | State: CA | Zip Code: 92705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Institute

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 25 / 2017

Transaction ID : 8849173

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 269.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fernandez, Rafael, M, , MD

Mailing Address 100 State Ave

City: Faribault | State: MN | Zip Code: 55021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 09 / D D 25 / Y Y Y Y 2017

Transaction ID : 8849174

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hire, Justin, , , MD

Mailing Address 205 Tremont Drive

City: Waynesville | State: MO | Zip Code: 65583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt: M M 09 / D D 25 / Y Y Y Y 2017

Transaction ID : 8849175

Amount of Each Receipt this Period: 42.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Espinoza, Luis, M, , MD

Mailing Address 5 Savannah Ridge Lane

City: Metairie | State: LA | Zip Code: 70001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: M M 09 / D D 25 / Y Y Y Y 2017

Transaction ID : 8849176

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 227.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mesko, J, Wesley, , MD

Mailing Address 2815 S Pennsylvania Ave
Ste 204

City: Lansing | State: MI | Zip Code: 48910-3496

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 25 / 2017
Transaction ID : 8849464

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Howell, James, T, , MD

Mailing Address 4800 Quarry Dr

City: Conway | State: AR | Zip Code: 72034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Conway Orthopedic Sports Medicine Clin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 25 / 2017
Transaction ID : 8849465

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russell, George, V, , Jr, MD

Mailing Address 102 Hawthorne Vale

City: Ridgeland | State: MS | Zip Code: 39157

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ of Mississippi Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 09 / 19 / 2017
Transaction ID : 8849494

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kamps, Bryan, Scott, , MD

Mailing Address 3741 Monarch Dr NE

City: Grand Rapids | State: MI | Zip Code: 49525

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spectrum Health Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 09 / D D 25 / Y Y Y Y 2017

Transaction ID : 8849495

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Callahan, Bert, C, , MD

Mailing Address 511 N Center St

City: Beaver Dam | State: WI | Zip Code: 53916-3071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fond Du Lac Regional Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 26 / Y Y Y Y 2017

Transaction ID : 8849607

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gleason, John, R, , MD

Mailing Address 5671 Peachtree Dunwoody Rd NE
Suite 700

City: Atlanta | State: GA | Zip Code: 30342

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 20 / Y Y Y Y 2017

Transaction ID : 8850008

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1184.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Steubs, John, Arthur, , MD

Mailing Address 7032 Oak Pointe Curve

City: Bloomington | State: MN | Zip Code: 55348

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of MN Department of Orthope

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 20 / Y Y Y Y 2017

Transaction ID : 8850009

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Michaud, Marc, J, , MD

Mailing Address 11 Cherry Ln

City: Bedford | State: NH | Zip Code: 03110

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NH Orthopaedic Center

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 20 / Y Y Y Y 2017

Transaction ID : 8850012

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weissberg, David, J, , MD

Mailing Address 100 Goose Hill Rd

City: Cold Spring Harbor | State: NY | Zip Code: 11724

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 20 / Y Y Y Y 2017

Transaction ID : 8850015

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Charoglu, Constantine, , , MD

Mailing Address 12 Waterford Drive

City: Hattiesburg | State: MS | Zip Code: 39402-2927

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southern Bone & Joint Specialists Inc

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 20 / 2017

Transaction ID : 8850016

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Marangi, Kent, Steven, , MD

Mailing Address 3813 Vista Blanca

City: San Clemente | State: CA | Zip Code: 92672

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 25 / 2017

Transaction ID : 8850032

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Joseph, Frank, R, , MD

Mailing Address 1605 Brandon Hall Drive

City: Atlanta | State: GA | Zip Code: 30350-3704

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 25 / 2017

Transaction ID : 8850036

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Biddulph, John, T, , MD

Mailing Address 1201 Sam Perry Blvd
Suite 201

City: Fredericksburg | State: VA | Zip Code: 22401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Clinic of Central Virginia
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850048

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jester, Adam, F, , MD

Mailing Address 8420 Boxwood Dr

City: Tampa | State: FL | Zip Code: 33615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Medical Group of Tampa Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850059

Amount of Each Receipt this Period: 150.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scovazzo, Mary, L, , MD

Mailing Address 875 Swift Blvd

City: Richland | State: WA | Zip Code: 99352

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Northwest Orthopaedics Assoc
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850074

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kefalas, John, C, , MD,SC

Mailing Address 2905 N Main St
Suite G

City: Decatur | State: IL | Zip Code: 62526-4276

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850097

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rizk, Wagdy, S, , MD

Mailing Address 3542 Smith Rd

City: Beaumont | State: TX | Zip Code: 77713

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850116

Amount of Each Receipt this Period: 300.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kayal, Robert, A, , MD

Mailing Address 1044 Dogwood Trail

City: Franklin Lakes | State: NJ | Zip Code: 07417

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850120

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Heaps, Robert, J, , MD

Mailing Address 66 Colonel Daniels Dr

City: Bedford | State: NH | Zip Code: 03110-5010

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850122

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bushnell, Brandon, Dubose, , MD, MBA

Mailing Address 60 Fallen Branch Circle SE

City: Rome | State: GA | Zip Code: 30161-2194

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Harbin Clinic Orthopedics and Sports M
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850124

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hogan, MaCalus, Vinson, , MD

Mailing Address 106 Field Brook Lane

City: Gibsonia | State: PA | Zip Code: 15044

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Pittsburgh Medical Cente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850151

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Spieles, Christopher, Joseph, , MD

Mailing Address 649 Parkside Drive

City: Wauseon | State: OH | Zip Code: 43567

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 26 / 2017

Transaction ID : 8850155

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kirol, Bernard, G, , MD

Mailing Address 106 Buckthorn Circle

City: Elgin | State: SC | Zip Code: 29045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics, PA

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt: 09 / 27 / 2017

Transaction ID : 8850159

Amount of Each Receipt this Period: 75.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hettrich, Carolyn, , , MD, MPH

Mailing Address 2983 Oliver Lane NE

City: Iowa City | State: IA | Zip Code: 52240

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Iowa Sports Medicine Cen

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 27 / 2017

Transaction ID : 8850160

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 825.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Matthew, Michael, , MD

Mailing Address 3727 Albemarle St NW

City: Washington | State: DC | Zip Code: 20016

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Drisko, Fee & Parkins
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 09 / 27 / 2017
Transaction ID : 8850161

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davis, Jeffrey, C, , MD

Mailing Address 1208 Perthshire Ct

City: Hoover | State: AL | Zip Code: 35242

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Andrews Sports Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 26 / 2017
Transaction ID : 8850453

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Doarn, Michael, C, , MD

Mailing Address 524 Bluestem Trl

City: N Sioux City | State: SD | Zip Code: 57049-5400

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tri-State Specialists, LLP
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 27 / 2017
Transaction ID : 8850511

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 850.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giammattei, Frank, P, , MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Premier Orthopaedic Associates

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 28 / 2017

Transaction ID : 8850967

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mitros, Stephen, F, , MD

Mailing Address 51045 Erin Glen Dr

City: Granger | State: IN | Zip Code: 46530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mitros Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: 09 / 28 / 2017

Transaction ID : 8850968

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gary, Joshua, Layne, , MD

Mailing Address 4226 Byron

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 28 / 2017

Transaction ID : 8850969

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Easley, Mark, E, , MD

Mailing Address Duke Medicine
4709 Creekstone Drive

City: Durham | State: NC | Zip Code: 27703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8850970

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fontanetta, A, Philip, , MD

Mailing Address 700 Hunt Ln

City: Manhasset | State: NY | Zip Code: 11030

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8850977

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carolan, Gregory, Francis, , MD

Mailing Address 1806 Meadow Ridge Ct

City: Bethlehem | State: PA | Zip Code: 18015

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Luke's Ortho Surg Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 956.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8850978

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, W, Stanley, , MD

Mailing Address 108 Valerie Dr

City: Lafayette | State: LA | Zip Code: 70508-6008

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 09 / 28 / 2017
Transaction ID : 8850979

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Razi, Afshin, , , MD

Mailing Address 2 Dogwood Rd

City: Great Neck | State: NY | Zip Code: 11024

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 09 / 28 / 2017
Transaction ID : 8850980

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Walker, Lawrence, R, , MD

Mailing Address PO Box 925
294 N Fairway

City: Lake Arrowhead | State: CA | Zip Code: 92352-0925

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Arrowhead Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852467

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hansen, Benjamin, , , MD

Mailing Address 1100 Virginia Avenue

City: Columbia | State: MO | Zip Code: 65212

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Missouri Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852470

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Matthews, David, S, , MD

Mailing Address 1926 Wood Ave

City: Colorado Springs | State: CO | Zip Code: 80907

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Colorado Springs Orthopaedic Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852711

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Adelaar, Robert, S, , MD

Mailing Address 10414 Cherokee Rd

City: Richmond | State: VA | Zip Code: 23235

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Veteran Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852712

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mesko, J, Wesley, , MD

Mailing Address 2815 S Pennsylvania Ave
Ste 204

City: Lansing | State: MI | Zip Code: 48910-3496

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852713

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shank, Lawrence, P, , MD

Mailing Address 1000 N Indian Paintbrush Cir

City: Payson | State: AZ | Zip Code: 85541-2945

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Payson Bone and Joint
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852714

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Konkel, Philip, D, , MD

Mailing Address 4134 Stonefield Dr

City: Mequon | State: WI | Zip Code: 53092

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Aurora Healthcare
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852715

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ingram, Dale, C, , MD

Mailing Address 606 Swansons Ridge Rd

City: Chattanooga | State: TN | Zip Code: 37421

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Erlaneer Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852716

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mechrefe, Anthony, P, , MD

Mailing Address 8 Thornwood Dr

City: Lincoln | State: RI | Zip Code: 02865

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852718

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Balfour, George, Walter, , MD

Mailing Address 11538 Rubio Ave

City: Granada Hills | State: CA | Zip Code: 91344

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): VOSA Hand Therapy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8852720

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rockowitz, Neal, L, , MD

Mailing Address Rockowitz Orthopaedic Center
3815 North 32nd St

City: Phoenix | State: AZ | Zip Code: 85018

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 30 / Y Y Y Y 2017

Transaction ID : 8853495

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sherbondy, Paul, Strawn, , MD

Mailing Address 507 Beaumont Drive

City: State College | State: PA | Zip Code: 16801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2017

Transaction ID : 8853499

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rungee, James, L, , MD

Mailing Address 2802 Pavilion Pl

City: Murfreesboro | State: TN | Zip Code: 37129

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tennessee Orthopedic Alliance
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2017

Transaction ID : 8853501

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1184.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Craig, William, Lewis, , MD

Mailing Address 423 Arbor Rd

City: Winston Salem | State: NC | Zip Code: 27104-2019

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoCarolina
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2017

Transaction ID : 8853502

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ricchetti, Eric, Thomas, , MD

Mailing Address 3200 Montgomery Road

City: Shaker Heights | State: OH | Zip Code: 44122

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2017

Transaction ID : 8853641

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uppal, Renny, , , MD

Mailing Address 1730 Sharpe Hill Circle

City: Reno | State: NV | Zip Code: 89523-3924

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 02 / Y Y Y Y 2017

Transaction ID : 8854136

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lowry, Kent, Jason, , MD

Mailing Address 3746 N Faust Lake Rd

City: Rhinelander | State: WI | Zip Code: 54501

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ascension Health
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 09 / 29 / 2017
Transaction ID : 8855163

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bailey, James, R, , MD

Mailing Address 10439 Blue Summit Court

City: San Diego | State: CA | Zip Code: 92131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 09 / 18 / 2017
Transaction ID : 8855209

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jiranek, William, A, , MD

Mailing Address 4066 Old River Trail

City: Powhatan | State: VA | Zip Code: 23139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: 09 / 22 / 2017
Transaction ID : 8855210

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Besh, Basil, R, , MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): FORM Hand, Wrist & Elbow Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 25 / Y Y Y Y 2017

Transaction ID : 8855215

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chakravarty, Rajit, , , MD

Mailing Address 727 Lorillard Ct Apt 401

City: Madison | State: WI | Zip Code: 53703-4279

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 09 / D D 25 / Y Y Y Y 2017

Transaction ID : 8855216

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damalas, Dino, , ,

Mailing Address 9400 Higgins Rd

City: Rosemont | State: IL | Zip Code: 60018-4974

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): AAOS
Occupation (for Individual): Chief Operations Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 09 / D D 27 / Y Y Y Y 2017

Transaction ID : 8855217

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
de Moura, Alexandre, Barbosa, , MD

Mailing Address 761 Merrick Ave

City: Westbury | State: NY | Zip Code: 11590-6608

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 09 / D D 27 / Y Y Y Y 2017

Transaction ID : 8855220

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hearty, Thomas, M, , MD

Mailing Address 2116 Woodside Rd

City: Ann Arbor | State: MI | Zip Code: 48104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IHA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8855224

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stephenson, John, Michael, , MD

Mailing Address 23 Hickory Creek Dr

City: Little Rock | State: AR | Zip Code: 72212-2509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Arkansas For Medical Sci
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8855226

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iorio, Richard, , , MD

Mailing Address 1 Indian Hill Road

City: New Rochelle | State: NY | Zip Code: 10804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 604.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8855228

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mejia, Alfonso, , , MD, MPH

Mailing Address 5332 South Shore Drive

City: Chicago | State: IL | Zip Code: 60615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Association of Orthopedic Sur
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8855229

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Thomas, E, , MD

Mailing Address 6435 Virginia Drive

City: Excelsior | State: MN | Zip Code: 55331-7775

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic and Fracture Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8855230

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wyatt, Ronald, W B, , MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 03 / Y Y Y Y 2017

Transaction ID : 8855871

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Adam, C, , MD

Mailing Address 6411 Mulligan Rd

City: Farmington | State: NM | Zip Code: 87402-4869

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Associates P.A.
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 03 / Y Y Y Y 2017

Transaction ID : 8856442

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Santore, Richard, F, , MD

Mailing Address PO Box 7016

City: Rancho Santa Fe | State: CA | Zip Code: 92067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sharp Healthcare Hip Preservation Cent
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8856461

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1184.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mosley, Emmett, Wayne, , MD

Mailing Address 1309 Upland Crest Ct

City: Gulf Breeze | State: FL | Zip Code: 32563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8856462

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zeman, Craig, Alan, , MD

Mailing Address 3525 Loma Vista Rd

City: Ventura | State: CA | Zip Code: 93003

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ventura Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8856771

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davison, Brian, L, , MD

Mailing Address 8090 Crossgate Ct S

City: Dublin | State: OH | Zip Code: 43017

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic One
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8856772

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartman, Gregg, P, , MD

Mailing Address 2500 White Wing Court

City: Camarillo | State: CA | Zip Code: 93012

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ventura Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8856775

Amount of Each Receipt this Period: 325.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Horn, J, Kevin, , MD

Mailing Address 9062 N Point Dr

City: Beach City | State: TX | Zip Code: 77523-8311

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8856776

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allard, Mark, Michael, , MD

Mailing Address 3010 Cortney Circle

City: Siloam Springs | State: AR | Zip Code: 72761

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 05 / Y Y Y Y 2017

Transaction ID : 8857031

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 659.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Daniel, Richard, , MD

Mailing Address 654 W Sawgrass Trail

City: Dakota Dunes | State: SD | Zip Code: 57049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CNOS
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 10 / D D 05 / Y Y Y Y 2017

Transaction ID : 8857032

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chou, Loretta, , , MD

Mailing Address Dept of Orthopaedic Surgery
450 Broadway Mail Code 6342

City: Redwood City | State: CA | Zip Code: 94063

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 05 / Y Y Y Y 2017

Transaction ID : 8857964

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Breien, Kristoffer, Meyers, , MD

Mailing Address 10977 57th St N

City: Lake Elmo | State: MN | Zip Code: 55042-9697

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Summit Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 05 / Y Y Y Y 2017

Transaction ID : 8857971

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kofoed, John, Charles, , MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sutter Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8859906

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kamps, Bryan, Scott, , MD

Mailing Address 3741 Monarch Dr NE

City: Grand Rapids | State: MI | Zip Code: 49525

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spectrum Health Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8859907

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Edmunds, J, Ollie, , MD, FACS

Mailing Address 1325 Calhoun St

City: New Orleans | State: LA | Zip Code: 70118

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8859908

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hamlin, Brian, R, , MD

Mailing Address 3169 Beechwood Drive

City: Allison Park | State: PA | Zip Code: 15101

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Magee-Womens Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8859911

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannon, David, L, , MD

Mailing Address 2639 Fox Hill Circle East

City: Germantown | State: TN | Zip Code: 38139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Campbell Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 368.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8859915

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Green, Daniel, William, , MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: M M 10 / D D 07 / Y Y Y Y 2017

Transaction ID : 8859997

Amount of Each Receipt this Period: 175.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1259.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lagan, Casey, Lee, , MD

Mailing Address 224 E 2nd Street

City: Dumas | State: TX | Zip Code: 79029

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Moore County Hospital District
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 07 / Y Y Y Y 2017

Transaction ID : 8859998

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garner, Richard, W, , MD

Mailing Address 7201 E Chester Heights Circle

City: Anchorage | State: AK | Zip Code: 99504-3563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 10 / D D 07 / Y Y Y Y 2017

Transaction ID : 8859999

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tyndall, William, A, , MD

Mailing Address 123 Brittany Ln

City: Hollidaysburg | State: PA | Zip Code: 16648

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 920.00

Date of Receipt: M M 10 / D D 07 / Y Y Y Y 2017

Transaction ID : 8860000

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Joel, D, , MD

Mailing Address Tucson Shoulder Elbow & Hand
3972 N Campbell Ave

City: Tucson | State: AZ | Zip Code: 85719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tucson Shoulder Elbow & Hand
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 07 / Y Y Y Y 2017

Transaction ID : 8860001

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Craig, Matthew, Rankin, , MD

Mailing Address 606 Meadowview Ct

City: Ambler | State: PA | Zip Code: 19002-2330

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rothman Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 08 / Y Y Y Y 2017

Transaction ID : 8860043

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clain, Michael, R, , MD

Mailing Address 9 Indian Head Rd

City: Riverside | State: CT | Zip Code: 06878

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 09 / Y Y Y Y 2017

Transaction ID : 8860046

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rawlings, John, M, , MD

Mailing Address 89 Whitaker Way N

City: Richmond Hill | State: GA | Zip Code: 31324

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Madigan Healthcare System
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 09 / Y Y Y Y 2017

Transaction ID : 8860060

Amount of Each Receipt this Period: 25.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Braaton, Paul, J, , MD

Mailing Address 1335 Coffee Rd Ste 100

City: Modesto | State: CA | Zip Code: 95355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 906.00

Date of Receipt: M M 10 / D D 09 / Y Y Y Y 2017

Transaction ID : 8860061

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lintecum, Neal, D, , MD

Mailing Address 789 N 1500 Road

City: Lawrence | State: KS | Zip Code: 66049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: M M 10 / D D 10 / Y Y Y Y 2017

Transaction ID : 8861432

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 209.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gill, John, T, , MD

Mailing Address 8230 Walnut Hill Lane
Suite 708

City: Dallas | State: TX | Zip Code: 75231

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 11 / Y Y Y Y 2017

Transaction ID : 8861701

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Morawski, David, R, , MD

Mailing Address 2525 Kaneville Rd

City: Geneva | State: IL | Zip Code: 60134-2578

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 14 / Y Y Y Y 2017

Transaction ID : 8863704

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900051

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hussain, Suleman, M, , MD

Mailing Address 2300 53rd Street, Suite #100

City: Bettendorf | State: IA | Zip Code: 52804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900052

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Weinstein, Richard, N, , MD

Mailing Address 21 Long Pond Rd

City: Armonk | State: NY | Zip Code: 10504

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900053

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Olin, Matthew, David, , MD

Mailing Address 605 Sunset Dr

City: Greensboro | State: NC | Zip Code: 27408-6412

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900054

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
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[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jamison, James, P, , MD

Mailing Address 7092 Killdeer Drive

City: Canfield | State: OH | Zip Code: 44406

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900055

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, Jeffrey, Mark, , MD

Mailing Address 610 San Elijo St

City: San Diego | State: CA | Zip Code: 92106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UNITE Orthopaedics Foundation
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900056

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Matthew, J, , MD

Mailing Address 14912 Chopine Pass

City: Roanoke | State: IN | Zip Code: 46783-9308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Hospital of Lutheran He
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900057

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Matthew, R, , MD

Mailing Address 920 Avenue B

City: Marrero | State: LA | Zip Code: 70072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900058

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Suk, Michael, , , MD

Mailing Address 1095 Limestoneville Road

City: Milton | State: PA | Zip Code: 17847

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900059

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Abrutyn, David, A, , MD

Mailing Address 20 Pitney Court

City: Basking Ridge | State: NJ | Zip Code: 07920

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900060

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linschoten, Niels, J, , MD

Mailing Address 11428 Center Court Blvd

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900061

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Springmeyer, Craig, R, , MD

Mailing Address 2905 North Pointe Dr

City: Shreveport | State: LA | Zip Code: 71106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8900069

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kwok, Moody, , , MD

Mailing Address 708 Presidential Dr

City: Horsham | State: PA | Zip Code: 19044

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 17 / Y Y Y Y 2017

Transaction ID : 8900243

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayden, Shawn, A, , MD

Mailing Address 5124 Marble Falls Ln

City: Plano | State: TX | Zip Code: 75093-7545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 10 / D D 17 / Y Y Y Y 2017

Transaction ID : 8900244

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schmidt, David, R, , MD

Mailing Address 21 Spurs Ln Ste 300

City: San Antonio | State: TX | Zip Code: 78240-1545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 17 / Y Y Y Y 2017

Transaction ID : 8900277

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kenerly, John, Lex, , III, MD

Mailing Address PO Box 1334

City: Jesup | State: GA | Zip Code: 31598-1334

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Bone & Joint Institute of South GA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2017

Transaction ID : 8900348

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2100.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raut, Sourendra, Sean, , MD

Mailing Address 6020 Falls Landing Drive

City: Cumming | State: GA | Zip Code: 30040

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2017

Transaction ID : 8900350

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Caldwell, Paul, E, , III, MD

Mailing Address PO Box 71690

City: Richmond | State: VA | Zip Code: 23255

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2017

Transaction ID : 8900351

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shah, Roshan, P, , MD, JD

Mailing Address 610 West 110th Street
Apt 3E

City: New York | State: NY | Zip Code: 10025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Columbia University Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 19 / Y Y Y Y 2017

Transaction ID : 8900900

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coles, Robert, E, , MD

Mailing Address 201 Lands End Rd

City: Morehead City | State: NC | Zip Code: 28557

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Center For Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 19 / Y Y Y Y 2017

Transaction ID : 8900901

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schmidt, Todd, A, , MD

Mailing Address 2865 Lake Park Drive

City: Jonesboro | State: GA | Zip Code: 30236

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoAtlanta
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906383

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, David, R, , MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906384

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCrosson, John, J, , MD

Mailing Address 2749 Fountainhead Way

City: Mount Pleasant | State: SC | Zip Code: 29466-8590

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Charleston Hip & Knee Replacement Cent

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906385

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stoeckl, Andrew, , , MD

Mailing Address 90 Fairlawn Dr

City: Amherst | State: NY | Zip Code: 14226

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 833.30

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906386

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chapman, Cary, B, , MD

Mailing Address 51 Flagg Court

City: Staten Island | State: NY | Zip Code: 10304

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906387

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 417.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannada, Lisa, K, , MD

Mailing Address 12872 Willow Pond Court

City: Saint Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Louis Univ School of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906388

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swenning, Todd, Allen, , MD

Mailing Address 41970 Rancho Manana Lane

City: Rancho Mirage | State: CA | Zip Code: 92270

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Institute of Clinical Orthopedics & Ne
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8906389

Amount of Each Receipt this Period: 90.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mansfield, David, J, , MD

Mailing Address 773 Azalea Pl

City: El Paso | State: TX | Zip Code: 79922

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): El Paso Orthopaedic Surgery Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: M M 10 / D D 22 / Y Y Y Y 2017

Transaction ID : 8906412

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 258.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCulloch, Patrick, T, , MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Ortho & Rehab

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: 10 / 22 / 2017

Transaction ID : 8906413

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Halsey, David, A, , MD

Mailing Address PO Box 9000 #132

City: Edgartown | State: MA | Zip Code: 02539

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Martha's Vineyard Hospital

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 10 / 22 / 2017

Transaction ID : 8906415

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hackbarth, Donald, A, , Jr, MD

Mailing Address N70 W14567 Terrace Drive

City: Menomonee Falls | State: WI | Zip Code: 53051

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Medical College of Wisconsin

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 22 / 2017

Transaction ID : 8906417

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Szczech, Bartlomiej, , , MD

Mailing Address 89 Intervale Way

City: Lake Placid | State: NY | Zip Code: 12946

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Joseph's Hospital Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 22 / Y Y Y Y 2017

Transaction ID : 8906418

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eckrich, Stephen, G J, , MD

Mailing Address 5511 Shooting Star Trail

City: Rapid City | State: SD | Zip Code: 57702

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 751.50

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8906437

Amount of Each Receipt this Period: 83.50

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Navarro, Ronald, Anthony, , MD

Mailing Address 18 Wide Loop Rd

City: Rolling Hills | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente South Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8906438

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 267.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Noffsinger, Mark, A, , MD

Mailing Address 7208 Selah Court

City: Mattawan | State: MI | Zip Code: 49071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8906439

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scales, Darrell, Kevin, , MD

Mailing Address 2000 Tee Dr

City: Braselton | State: GA | Zip Code: 30517-4078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8906440

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Barber, Thomas, C, , MD

Mailing Address 6 EL Caminito

City: Orinda | State: CA | Zip Code: 94563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8906441

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pavlatos, Christ, J, , MD, MBA

Mailing Address 1301 North Dearborn Unit 804

City: Chicago | State: IL | Zip Code: 60610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8906442

Amount of Each Receipt this Period: 41.67

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
More, Robert, Cameron, , MD

Mailing Address 8100 Wescott Drive
Suite 101

City: Flemington | State: NJ | Zip Code: 08822

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hunterdon Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8907047

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Holub, Daniel, P, , MD

Mailing Address N15 W28300 Golf Road

City: Pewaukee | State: WI | Zip Code: 53072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Assoc Of Wisconsin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 24 / Y Y Y Y 2017

Transaction ID : 8907087

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1125.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartsock, Langdon, A, , MD

Mailing Address 188 Tradd Street

City: Charleston | State: SC | Zip Code: 29401

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Med Univ of SC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 24 / Y Y Y Y 2017

Transaction ID : 8907088

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Torres, Daniel, , , MD

Mailing Address 1488 Shelburne Ct

City: Allentown | State: PA | Zip Code: 18104

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): University of Texas Med Branch
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 10 / D D 24 / Y Y Y Y 2017

Transaction ID : 8907089

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Malone, Stephen, L, , MD

Mailing Address 923 Westover Rd

City: Wilmington | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): The Orthopaedic Spine Ctr PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M 10 / D D 24 / Y Y Y Y 2017

Transaction ID : 8907090

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 269.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kaminski, Ken, J, , MD

Mailing Address 6987 Canal St

City: Tyler | State: TX | Zip Code: 75703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Azalea Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 24 / Y Y Y Y 2017

Transaction ID : 8907091

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waddell, Bradford, Sutton, , MD

Mailing Address 235 North Regent St.

City: Port Chester | State: NY | Zip Code: 10573

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 10 / D D 02 / Y Y Y Y 2017

Transaction ID : 8907192

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Protomastro, Paul, D, , MD

Mailing Address 8 Stonewall Court

City: South Salem | State: NY | Zip Code: 10590

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoCT
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 02 / Y Y Y Y 2017

Transaction ID : 8907194

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Newson, Graham, , ,

Mailing Address 317 Massachusetts Ave NE
1st Floor

City: Washington | State: DC | Zip Code: 20002-5769

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): American Academy of Orthopaedic Surg
Occupation (for Individual): Director, Office of Goverment Relation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 10 / D D 02 / Y Y Y Y 2017

Transaction ID : 8907196

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vessely, Michael, B, , MD

Mailing Address 522 Second St

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Willamette Valley Medical Center-
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 04 / Y Y Y Y 2017

Transaction ID : 8907197

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheehan, John, P, , MD

Mailing Address 6621 Cuming St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Boys Town
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8907198

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Srikumaran, Umasuthan, , , MD, MBA

Mailing Address 12195 Hayland Farm Way

City: Ellicott City | State: MD | Zip Code: 21042-6014

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Johns Hopkins
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M 10 / D D 13 / Y Y Y Y 2017

Transaction ID : 8907199

Amount of Each Receipt this Period: 5000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mardjetko, Steven, M, , MD

Mailing Address 443 E Illinois Road

City: Lake Forest | State: IL | Zip Code: 60045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: M M 10 / D D 06 / Y Y Y Y 2017

Transaction ID : 8907200

Amount of Each Receipt this Period: 2000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wills, Christopher, A, , MD

Mailing Address 11622 Vista Mar

City: North Tustin | State: CA | Zip Code: 92705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8907915

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 7084.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hire, Justin, , , MD

Mailing Address 205 Tremont Drive

City: Waynesville | State: MO | Zip Code: 65583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8907917

Amount of Each Receipt this Period: 42.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Espinoza, Luis, M, , MD

Mailing Address 5 Savannah Ridge Lane

City: Metairie | State: LA | Zip Code: 70001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 845.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8907918

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Callahan, Bert, C, , MD

Mailing Address 511 N Center St

City: Beaver Dam | State: WI | Zip Code: 53916-3071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fond Du Lac Regional Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2017

Transaction ID : 8908363

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 211.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Seitz, William, H, , Jr, MD

Mailing Address 1730 W 25th St
2C

City: Cleveland | State: OH | Zip Code: 44113

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lutheran Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2017

Transaction ID : 8908364

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McFarland, Edward, G, , MD

Mailing Address 10753 Falls Rd
Ste 215

City: Lutherville | State: MD | Zip Code: 21093-4535

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Johns Hopkins University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 13 / Y Y Y Y 2017

Transaction ID : 8908448

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nagda, Sameer, H, , MD

Mailing Address 8713 Standish Rd

City: Alexandria | State: VA | Zip Code: 22308-2512

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anderson Ortho Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 13 / Y Y Y Y 2017

Transaction ID : 8908449

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Watkins, Troy, B, , Jr, MD

Mailing Address 8854 W Emerald Street
Suite 170

City: Boise | State: ID | Zip Code: 83704

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Treasure Valley Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 19 / Y Y Y Y 2017

Transaction ID : 8908451

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cheong, David, , , MD

Mailing Address 5010 W Dante Ave

City: Tampa | State: FL | Zip Code: 33629-7513

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Associates of West Florida
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 19 / Y Y Y Y 2017

Transaction ID : 8908452

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 17 / Y Y Y Y 2017

Transaction ID : 8908458

Amount of Each Receipt this Period: 160.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1410.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Detrisac, David, Arthur, , MD

Mailing Address 3609 E Arbutus

City: Okemos | State: MI | Zip Code: 48864

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908488

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russell, George, V, , Jr, MD

Mailing Address 102 Hawthorne Vale

City: Ridgeland | State: MS | Zip Code: 39157

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ of Mississippi Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908489

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Miller, Brett, A, , MD

Mailing Address 901 N 8th St

City: Wathena | State: KS | Zip Code: 66090-0554

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908490

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ayers, Michael, E, , MD

Mailing Address 10 Crescent Ave

City: Scituate | State: MA | Zip Code: 02066

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): South Shore Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908494

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kim, Kenneth, K, , MD

Mailing Address 7584 Foote Rd

City: Clinton | State: NY | Zip Code: 13323-3404

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908497

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Orson, Gregory, G, , MD

Mailing Address 2770 Samuel Dr S

City: Fargo | State: ND | Zip Code: 58104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sanford Health
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908502

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Efird, Chad, , , MD

Mailing Address 147 Royal Dornoch Dr

City: Branson | State: MO | Zip Code: 65616-7414

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Cox Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 23 / Y Y Y Y 2017

Transaction ID : 8908503

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wilson, Arnold, , , MD

Mailing Address 123 Dorchester Rd

City: Scarsdale | State: NY | Zip Code: 10583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908577

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waldrop, Preston, A, , MD

Mailing Address Virginia Orthopedics
101 Knotbreak Rd

City: Salem | State: VA | Zip Code: 24153-5404

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Virginia Orthopaedic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908578

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zapanta, Richard, , , MD

Mailing Address 5830 Beverly Hills Drive

City: Whittier | State: CA | Zip Code: 90601

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908579

Amount of Each Receipt this Period: 300.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Petit, Charles, Justin, , MD

Mailing Address 1515 NW 18th Ave
Suite 300

City: Portland | State: OR | Zip Code: 97209

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908580

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Charen, Jeffrey, H, , MD

Mailing Address 205 May St Ste 202

City: Edison | State: NJ | Zip Code: 08837

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthoc Assoc of Central Jersey
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908595

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bryan, James, McMaster, , MD

Mailing Address 104 Pelican Circle

City: Daytona Beach | State: FL | Zip Code: 32118

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Clinic of Daytona Beach
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908596

Amount of Each Receipt this Period: 475.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tewes, Douglas, P, , MD

Mailing Address Suite 100
6900 A St

City: Lincoln | State: NE | Zip Code: 68510

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lincoln Orthopaedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908597

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pierron, Robert, Louis, , MD

Mailing Address 30765 Overlook Run

City: Buena Vista | State: CO | Zip Code: 81211-9836

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Retired
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908601

Amount of Each Receipt this Period: 300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1775.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooper, Scott, Snow, , MD

Mailing Address 407 NW A St

City: Bentonville | State: AR | Zip Code: 72712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908602

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooper, Scott, Snow, , MD

Mailing Address 407 NW A St

City: Bentonville | State: AR | Zip Code: 72712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2017

Transaction ID : 8908621

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maender, Christopher, W, , MD

Mailing Address 4509 Turtle Bay

City: Springfield | State: IL | Zip Code: 62711

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2017

Transaction ID : 8908632

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kirol, Bernard, G, , MD

Mailing Address 106 Buckthorn Circle

City: Elgin | State: SC | Zip Code: 29045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics, PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 10 / D D 27 / Y Y Y Y 2017

Transaction ID : 8908633

Amount of Each Receipt this Period: 75.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giammattei, Frank, P, , MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Premier Orthopaedic Associates
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908889

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mitros, Stephen, F, , MD

Mailing Address 51045 Erin Glen Dr

City: Granger | State: IN | Zip Code: 46530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mitros Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908890

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 244.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Adamson, Kent, R, , MD

Mailing Address 225 Via Rancho

City: San Clemente | State: CA | Zip Code: 92672

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908891

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gary, Joshua, Layne, , MD

Mailing Address 4226 Byron

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908892

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Easley, Mark, E, , MD

Mailing Address Duke Medicine
4709 Creekstone Drive

City: Durham | State: NC | Zip Code: 27703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908893

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carolan, Gregory, Francis, , MD

Mailing Address 1806 Meadow Ridge Ct

City: Bethlehem | State: PA | Zip Code: 18015

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Luke's Ortho Surg Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908894

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, W, Stanley, , MD

Mailing Address 108 Valerie Dr

City: Lafayette | State: LA | Zip Code: 70508-6008

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908895

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bass, Robert, L, , MD

Mailing Address 5721 Salisbury

City: Prosper | State: TX | Zip Code: 75078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTSW
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2017

Transaction ID : 8908896

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Lynn, M, , MD

Mailing Address Des Moines Ortho Surgeons
6001 Westown Parkway

City: West Des Moines | State: IA | Zip Code: 50266

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Des Moines Ortho Surgeons
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: M M 10 / D D 30 / Y Y Y Y 2017

Transaction ID : 8927409

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russell, Jeremy, , , DO

Mailing Address 8000 Woodbine Ln

City: Wausau | State: WI | Zip Code: 54401-8459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Associates of Wausau, S.C.
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 10 / D D 30 / Y Y Y Y 2017

Transaction ID : 8927411

Amount of Each Receipt this Period: 450.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Reznik, Alan, M, , MD, MBA

Mailing Address 19 Beach Ave

City: Milford | State: CT | Zip Code: 06460-8202

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopaedic Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 30 / Y Y Y Y 2017

Transaction ID : 8927412

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kofoed, John, Charles, , MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sutter Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 10 / D D 30 / Y Y Y Y 2017

Transaction ID : 8927413

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hennrikus, William, L, , Jr, MD

Mailing Address 75 Laurel Ridge Rd

City: Hershey | State: PA | Zip Code: 17033

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Penn State Medical School
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: M M 10 / D D 30 / Y Y Y Y 2017

Transaction ID : 8927414

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cummings, Brock, Stefan, , MD

Mailing Address 701 Heaven's Gate

City: Paradise | State: CA | Zip Code: 95969

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Valley Ridge Orthopedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 30 / Y Y Y Y 2017

Transaction ID : 8927415

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jevsevar, David, S, , MD, MBA

Mailing Address PO Box 870

City: Grantham | State: NH | Zip Code: 03753

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Dartmouth-Hitchcock Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 31 / Y Y Y Y 2017

Transaction ID : 8927427

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dhillon, Manjit, S, , MD

Mailing Address 12705 Hogans Dr

City: Chester | State: VA | Zip Code: 23836

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southside Regional Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 31 / Y Y Y Y 2017

Transaction ID : 8927428

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pushkin, Gary, W, , MD

Mailing Address 4101 Greenway

City: Baltimore | State: MD | Zip Code: 21218

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Cohen & Pushkin MD PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 10 / D D 31 / Y Y Y Y 2017

Transaction ID : 8927429

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sherbondy, Paul, Strawn, , MD

Mailing Address 507 Beaumont Drive

City: State College | State: PA | Zip Code: 16801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 01 / Y Y Y Y 2017

Transaction ID : 8927657

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rungee, James, L, , MD

Mailing Address 2802 Pavilion Pl

City: Murfreesboro | State: TN | Zip Code: 37129

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tennessee Orthopedic Alliance
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: M M 11 / D D 01 / Y Y Y Y 2017

Transaction ID : 8927658

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bailey, James, R, , MD

Mailing Address 10439 Blue Summit Court

City: San Diego | State: CA | Zip Code: 92131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2017

Transaction ID : 8927912

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 268.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fogle, Evander, F, , MD

Mailing Address 4162 North Stratford Rd, NE

City: Atlanta | State: GA | Zip Code: 30342

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: M M 10 / D D 17 / Y Y Y Y 2017

Transaction ID : 8927913

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gocke, Ryan, Thomas, , MD

Mailing Address 2613 Wimbledon Point Dr

City: Virginia Bch | State: VA | Zip Code: 23454-1169

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8927917

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jiranek, William, A, , MD

Mailing Address 4066 Old River Trail

City: Powhatan | State: VA | Zip Code: 23139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2017

Transaction ID : 8927918

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Besh, Basil, R, , MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): FORM Hand, Wrist & Elbow Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 22 / Y Y Y Y 2017

Transaction ID : 8927919

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damalas, Dino, , ,

Mailing Address 9400 Higgins Rd

City: Rosemont | State: IL | Zip Code: 60018-4974

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): AAOS
Occupation (for Individual): Chief Operations Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 10 / D D 26 / Y Y Y Y 2017

Transaction ID : 8927920

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stephenson, John, Michael, , MD

Mailing Address 23 Hickory Creek Dr

City: Little Rock | State: AR | Zip Code: 72212-2509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Arkansas For Medical Sci
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 27 / Y Y Y Y 2017

Transaction ID : 8927921

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Delanois, Ronald, Emilio, , MD

Mailing Address 6 Brookfield Garth

City: Lutherville Timonium | State: MD | Zip Code: 21093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lifebridge
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: M M 10 / D D 27 / Y Y Y Y 2017

Transaction ID : 8927922

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carson, Eric, Ward, , MD

Mailing Address 802 Village Rd

City: Charlottesville | State: VA | Zip Code: 22903

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Virginia
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 10 / D D 27 / Y Y Y Y 2017

Transaction ID : 8927923

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iorio, Richard, , , MD

Mailing Address 1 Indian Hill Road

City: New Rochelle | State: NY | Zip Code: 10804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 688.00

Date of Receipt: M M 10 / D D 27 / Y Y Y Y 2017

Transaction ID : 8927924

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mejia, Alfonso, , , MD, MPH

Mailing Address 5332 South Shore Drive

City: Chicago | State: IL | Zip Code: 60615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Association of Orthopedic Sur
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 10 / D D 27 / Y Y Y Y 2017

Transaction ID : 8927925

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Khanuja, Harpal, Singh, , MD

Mailing Address 1 Ridge Farm Court

City: Cockeysville | State: MD | Zip Code: 21030

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): John Hopkins University, Department of
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: M M 10 / D D 29 / Y Y Y Y 2017

Transaction ID : 8927926

Amount of Each Receipt this Period: 21.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waddell, Bradford, Sutton, , MD

Mailing Address 235 North Regent St.

City: Port Chester | State: NY | Zip Code: 10573

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 10 / D D 29 / Y Y Y Y 2017

Transaction ID : 8927927

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 189.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wright, Craig, , , MD

Mailing Address 278 Essex Ave

City: Bloomfield | State: NJ | Zip Code: 07003

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 10 / D D 18 / Y Y Y Y 2017

Transaction ID : 8927929

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uppal, Renny, , , MD

Mailing Address 1730 Sharpe Hill Circle

City: Reno | State: NV | Zip Code: 89523-3924

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 02 / Y Y Y Y 2017

Transaction ID : 8927950

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wyatt, Ronald, W B, , MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: M M 11 / D D 03 / Y Y Y Y 2017

Transaction ID : 8928908

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baker, James, K, , MD

Mailing Address 727 Belvin St

City: San Marcos | State: TX | Zip Code: 78666

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 11 / D D 03 / Y Y Y Y 2017

Transaction ID : 8929954

Amount of Each Receipt this Period: 50.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lieberman, Isador, H, , MD, MBA, F

Mailing Address Scoliosis and Spine Tumor Center
6020 W Parker Rd, Ste 200

City: Plano | State: TX | Zip Code: 75093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Texas Back Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 04 / Y Y Y Y 2017

Transaction ID : 8929955

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Renard, Regis, Louis, , MD

Mailing Address 21 Farnham Loop

City: Little Rock | State: AR | Zip Code: 72223

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UAMS, Department of Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 04 / Y Y Y Y 2017

Transaction ID : 8929956

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Santore, Richard, F, , MD

Mailing Address PO Box 7016

City: Rancho Santa Fe | State: CA | Zip Code: 92067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sharp Healthcare Hip Preservation Cent

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: 11 / 04 / 2017

Transaction ID : 8929957

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mosley, Emmett, Wayne, , MD

Mailing Address 1309 Upland Crest Ct

City: Gulf Breeze | State: FL | Zip Code: 32563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: 11 / 04 / 2017

Transaction ID : 8929958

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McGuire, Daniel, Thompson, , MD

Mailing Address PO Box 862

City: Holden | State: ME | Zip Code: 04429-0862

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Down East Orthopedic Associates

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 04 / 2017

Transaction ID : 8929960

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Daniel, Richard, , MD

Mailing Address 654 W Sawgrass Trail

City: Dakota Dunes | State: SD | Zip Code: 57049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CNOS
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt: M M 11 / D D 05 / Y Y Y Y 2017

Transaction ID : 8930002

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ortiz, Jose, Antonio, , Jr, MD

Mailing Address S8965 Stonebrook Dr

City: Eleva | State: WI | Zip Code: 54738

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mayo Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 05 / Y Y Y Y 2017

Transaction ID : 8930004

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cameron, Julian A, , , MD

Mailing Address 405 S Riverside Dr

City: Pompano Beach | State: FL | Zip Code: 33062

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Comprehensive Spine Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8930007

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davidson, Randall, L, , Jr, MD

Mailing Address 1050 N James Campbell Blvd Ste 200

City: Columbia | State: TN | Zip Code: 38401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8930008

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pui, Christine, , , MD

Mailing Address 639 City View Dr

City: Minnetonka | State: MN | Zip Code: 55305

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Park Nicollet Clinic, Orthopedic Surge
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8932679

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schwappach, John, R, , MD

Mailing Address 330 Forest St

City: Denver | State: CO | Zip Code: 80220-5753

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Denver Metro Orthopedics, PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8932751

Amount of Each Receipt this Period: 400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1150.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rosenzweig, Scott, L, , MD

Mailing Address 528 Palisades Dr Ste 516

City: Pacific Palisades | State: CA | Zip Code: 90272

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8932755

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Berson, Lawrence, , , MD

Mailing Address 71 Arlen Way

City: West Hartford | State: CT | Zip Code: 06117

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): MOS PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8932946

Amount of Each Receipt this Period: 50.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Green, Daniel, William, , MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1925.00

Date of Receipt: M M 11 / D D 07 / Y Y Y Y 2017

Transaction ID : 8932948

Amount of Each Receipt this Period: 175.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 475.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Milia, Marc, J, , MD

Mailing Address 1386 Stanley

City: Birmingham | State: MI | Zip Code: 48009

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Oakland Regional Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 07 / 2017
Transaction ID : 8932949

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garner, Richard, W, , MD

Mailing Address 7201 E Chester Heights Circle

City: Anchorage | State: AK | Zip Code: 99504-3563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt: 11 / 07 / 2017
Transaction ID : 8932950

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tyndall, William, A, , MD

Mailing Address 123 Brittany Ln

City: Hollidaysburg | State: PA | Zip Code: 16648

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1004.00

Date of Receipt: 11 / 07 / 2017
Transaction ID : 8932951

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Joel, D, , MD

Mailing Address Tucson Shoulder Elbow & Hand
3972 N Campbell Ave

City: Tucson | State: AZ | Zip Code: 85719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tucson Shoulder Elbow & Hand
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 07 / Y Y Y Y 2017

Transaction ID : 8932952

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Singer, Ira, Joel, , MD

Mailing Address 22 Intervale Rd

City: Providence | State: RI | Zip Code: 02906

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 07 / Y Y Y Y 2017

Transaction ID : 8934288

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Richer, Ross, J, , MD

Mailing Address 150 Hillspoint Rd

City: Westport | State: CT | Zip Code: 06880

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 08 / Y Y Y Y 2017

Transaction ID : 8934428

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Taksali, Sudeep, , , MD

Mailing Address 7535 SW Schroeder Way

City: Wilsonville | State: OR | Zip Code: 97070-9574

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hope Orthopedics of Oregon

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 08 / Y Y Y Y 2017

Transaction ID : 8934430

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clain, Michael, R, , MD

Mailing Address 9 Indian Head Rd

City: Riverside | State: CT | Zip Code: 06878

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 09 / Y Y Y Y 2017

Transaction ID : 8937969

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rawlings, John, M, , MD

Mailing Address 89 Whitaker Way N

City: Richmond Hill | State: GA | Zip Code: 31324

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Madigan Healthcare System

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: M M 11 / D D 09 / Y Y Y Y 2017

Transaction ID : 8937970

Amount of Each Receipt this Period: 25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 359.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Braaton, Paul, J, , MD

Mailing Address 1335 Coffee Rd Ste 100

City: Modesto | State: CA | Zip Code: 95355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 990.00

Date of Receipt: M M 11 / D D 09 / Y Y Y Y 2017

Transaction ID : 8937971

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hsu, Joseph, R, , MD

Mailing Address 2816 Hedgewyk Pl

City: Charlotte | State: NC | Zip Code: 28211

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 09 / Y Y Y Y 2017

Transaction ID : 8937972

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Casey, Steven, E, , MD

Mailing Address 711 Lawn Ave Ste 3

City: Sellersville | State: PA | Zip Code: 18960-1575

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 09 / Y Y Y Y 2017

Transaction ID : 8937995

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ploska, Philip, G, , MD

Mailing Address 392 Wylde Woode Dr

City: Mc Donough | State: GA | Zip Code: 30253

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 09 / Y Y Y Y 2017

Transaction ID : 8938047

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lintecum, Neal, D, , MD

Mailing Address 789 N 1500 Road

City: Lawrence | State: KS | Zip Code: 66049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 11 / D D 10 / Y Y Y Y 2017

Transaction ID : 8938622

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lee, Arthur, F, , MD

Mailing Address 5270 Drake Road

City: Cincinnati | State: OH | Zip Code: 45243

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 10 / Y Y Y Y 2017

Transaction ID : 8939151

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Binder, William, F, , MD

Mailing Address 2421 Lema Dr

City: Lake Havasu City | State: AZ | Zip Code: 86406

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lakeside Orthopedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 12 / Y Y Y Y 2017

Transaction ID : 8939391

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westrich, Geoffrey, H, , MD

Mailing Address 535 East 70th Street

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hospital for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 13 / Y Y Y Y 2017

Transaction ID : 8941360

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Edwards, Thomas, Bradley, , MD

Mailing Address 7401 S Main St

City: Houston | State: TX | Zip Code: 77030-4509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Texas Orthopedic Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 14 / Y Y Y Y 2017

Transaction ID : 8942494

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Gregory, K, , MD

Mailing Address 288 Groveland St

City: Haverhill | State: MA | Zip Code: 01830-6669

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Associates In Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8943396

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vani, John, Nicholas, , MD

Mailing Address 370 Terrace Trail W

City: Lake Quivira | State: KS | Zip Code: 66217-8697

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho KC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8943965

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1084.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944171

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hussain, Suleman, M, , MD

Mailing Address 2300 53rd Street, Suite #100

City: Bettendorf | State: IA | Zip Code: 52804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944172

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pinto, Mark, C, , MD

Mailing Address 1382 Waterways Dr

City: Ann Arbor | State: MI | Zip Code: 48108

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944173

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Matthew, J, , MD

Mailing Address 14912 Chopine Pass

City: Roanoke | State: IN | Zip Code: 46783-9308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Hospital of Lutheran He
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 935.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944174

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Matthew, R, , MD

Mailing Address 920 Avenue B

City: Marrero | State: LA | Zip Code: 70072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944175

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linschoten, Niels, J, , MD

Mailing Address 11428 Center Court Blvd

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944177

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gillespy, Mark, , , MD

Mailing Address 250 Riverside Dr

City: Ormond Beach | State: FL | Zip Code: 32176

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Clinic of Daytona Beach, P
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8944202

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 668.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carlson, William, E, , MD

Mailing Address 3 SE Tuscan Lane

City: Stuart | State: FL | Zip Code: 34996

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): South Florida Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944684

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayden, Shawn, A, , MD

Mailing Address 5124 Marble Falls Ln

City: Plano | State: TX | Zip Code: 75093-7545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944685

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kamps, Bryan, Scott, , MD

Mailing Address 3741 Monarch Dr NE

City: Grand Rapids | State: MI | Zip Code: 49525

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spectrum Health Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944948

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fisher, David, A, , MD

Mailing Address 351 Breakwater Dr

City: Fishers | State: IN | Zip Code: 46037

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoIndy
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944949

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewish, Gregory, Daniel, , MD

Mailing Address 2211 Lyell Ave Ste 107

City: Rochester | State: NY | Zip Code: 14606-5743

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Westside Orthopedic PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944950

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Risko, Timothy, M, , MD

Mailing Address 7902 Valcour Dr

City: Amarillo | State: TX | Zip Code: 79119-6267

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944951

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1700.00

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

SCHEDULE A (FEC Form 3X)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Davidovitch, Roy, , , MD

Mailing Address 5 Woodland Park Drive

City: Tenafly | State: NJ | Zip Code: 07670

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944952

Amount of Each Receipt this Period: 450.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kress, Kenneth, J, , MD

Mailing Address 655 Blakenham Ct

City: Alpharetta | State: GA | Zip Code: 30022

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Northside Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944957

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hanson, Eric, C, , MD

Mailing Address 1630 E Herndon Ave Ste 202

City: Fresno | State: CA | Zip Code: 93720-3305

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fresno Surgical Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8944960

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Noyes, Frank, R, , MD

Mailing Address 9400 Cunningham Rd

City: Cincinnati | State: OH | Zip Code: 45243

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Health-Cincinnati Sportsmedicine

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 11 / 17 / 2017

Transaction ID : 8944964

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Burstein, David, , , MD

Mailing Address Farmington Valley Ortho Assoc
34 Dale Rd Ste 208

City: Avon | State: CT | Zip Code: 06001-3659

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 15 / 2017

Transaction ID : 8945621

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moriarty, Robert, V, , MD

Mailing Address 755 New York Ave
Suite 250

City: Huntington | State: NY | Zip Code: 11743-4285

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 15 / 2017

Transaction ID : 8945622

Amount of Each Receipt this Period: 300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ekroth, Scott, Robert, , MD

Mailing Address 1758 Newberry Ave

City: Solon | State: IA | Zip Code: 52333

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Physicians Clinic of Iowa
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945623

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zak, Paul, J, , MD

Mailing Address 879 Harbor Island

City: Clearwater Beach | State: FL | Zip Code: 33767

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Coastal Spine Specialists
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945624

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Higgins, Jason, A, , MD

Mailing Address 102 Estates Dr

City: Thibodaux | State: LA | Zip Code: 70301

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Sports Specialists of Loui
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945625

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 950.00

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rush, Gus, A, , III, MD

Mailing Address 3117 Poplar Springs Dr

City: Meridian | State: MS | Zip Code: 39305

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945626

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pushkin, Gary, W, , MD

Mailing Address 4101 Greenway

City: Baltimore | State: MD | Zip Code: 21218

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Cohen & Pushkin MD PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945639

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schneider, Scott, B, , MD

Mailing Address 1180 Mary Hill Cir

City: Hartland | State: WI | Zip Code: 53029

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Associates of Wisconsin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945640

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hoepfner, Peter, E, , MD

Mailing Address 2584 Violet St

City: Glenview | State: IL | Zip Code: 60026

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Bone & Joint Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 15 / 2017
Transaction ID : 8945642

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hughes, David, P, , MD

Mailing Address 914 Pennwood Circle

City: Lancaster | State: PA | Zip Code: 17601

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 15 / 2017
Transaction ID : 8945643

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hockman, David, E, , MD

Mailing Address 2413 Lacewood

City: Columbia | State: MO | Zip Code: 65201

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 15 / 2017
Transaction ID : 8945645

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Doty, Jesse, Forbes, , MD

Mailing Address 4986 Hamillville Ct

City: Hixson | State: TN | Zip Code: 37343

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Erlanger Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945646

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Quigley, John, T, , MD

Mailing Address Suite 103
289 W Huntington Dr

City: Arcadia | State: CA | Zip Code: 91007

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Congress Ortho Assoc Inc
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 15 / Y Y Y Y 2017

Transaction ID : 8945647

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gay, David, , , MD

Mailing Address 433 Ocean Grove Circle

City: Saint Augustine | State: FL | Zip Code: 32080

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8946280

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raut, Sourendra, Sean, , MD

Mailing Address 6020 Falls Landing Drive

City: Cumming | State: GA | Zip Code: 30040

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 18 / Y Y Y Y 2017

Transaction ID : 8946299

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shah, Roshan, P, , MD, JD

Mailing Address 610 West 110th Street
Apt 3E

City: New York | State: NY | Zip Code: 10025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Columbia University Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 19 / Y Y Y Y 2017

Transaction ID : 8946343

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wint, Jeffrey, C, , MD

Mailing Address Hand Center of Western Mass
3550 Main St Ste 204

City: Springfield | State: MA | Zip Code: 01107-1708

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 19 / Y Y Y Y 2017

Transaction ID : 8946344

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coles, Robert, E, , MD

Mailing Address 201 Lands End Rd

City: Morehead City | State: NC | Zip Code: 28557

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Center For Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 19 / Y Y Y Y 2017

Transaction ID : 8946345

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harrer, Michael, Francis, , MD

Mailing Address 17 Kingston Lane

City: Ocean City | State: NJ | Zip Code: 08226

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 19 / Y Y Y Y 2017

Transaction ID : 8946347

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fareed, Donald, O, , MD

Mailing Address PO Box 50547
1483 East Valley Road Ste 19

City: Santa Barbara | State: CA | Zip Code: 93150-0547

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 19 / Y Y Y Y 2017

Transaction ID : 8946350

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
St Pierre, Patrick, , , MD

Mailing Address 49967 Ridge View Way

City: Palm Desert | State: CA | Zip Code: 92260-6778

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 19 / Y Y Y Y 2017

Transaction ID : 8946356

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russell, George, V, , Jr, MD

Mailing Address 102 Hawthorne Vale

City: Ridgeland | State: MS | Zip Code: 39157

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ of Mississippi Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947489

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kleinhenz, Dominic, James, , MD

Mailing Address 2804 Marina Cir

City: Lighthouse Point | State: FL | Zip Code: 33064-9300

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Holy Cross Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947490

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Heller, Daniel, H, , MD

Mailing Address 9327 N 3rd St Ste 101

City: Phoenix | State: AZ | Zip Code: 85020

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Arizona Bone & Joint Surgeons
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947493

Amount of Each Receipt this Period: 130.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dahl, William, John, , MD

Mailing Address 69 Ruffed Grouse Dr

City: Bridgeport | State: WV | Zip Code: 26330-7989

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): United Hospital Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947496

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bucker, Brandon, , , MD

Mailing Address 815 Main Street
Apt A

City: Lynchburg | State: VA | Zip Code: 24504

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Virginia
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947497

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 630.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rashid, Rola, H, , MD

Mailing Address 42 Delancey Ct

City: Pittsford | State: NY | Zip Code: 14534

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947498

Amount of Each Receipt this Period: 200.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rink, Peter, C, , DO

Mailing Address 9 Woodview Way

City: Davenport | State: IA | Zip Code: 52807-3618

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947500

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vessely, Michael, B, , MD

Mailing Address 522 Second St

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Willamette Valley Medical Center-
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8947547

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 534.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheehan, John, P, , MD

Mailing Address 6621 Cuming St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Boys Town
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 06 / Y Y Y Y 2017

Transaction ID : 8947549

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ritchie, William, L, , IV, MD

Mailing Address 201 Cedar SE Ste 6600

City: Albuquerque | State: NM | Zip Code: 87106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 16 / Y Y Y Y 2017

Transaction ID : 8947550

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bailey, James, R, , MD

Mailing Address 10439 Blue Summit Court

City: San Diego | State: CA | Zip Code: 92131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017

Transaction ID : 8947552

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, David, R, , MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt: M M 11 / D D 21 / Y Y Y Y 2017

Transaction ID : 8948048

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stoeckl, Andrew, , , MD

Mailing Address 90 Fairlawn Dr

City: Amherst | State: NY | Zip Code: 14226

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 916.63

Date of Receipt: M M 11 / D D 21 / Y Y Y Y 2017

Transaction ID : 8948049

Amount of Each Receipt this Period: 83.33

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chapman, Cary, B, , MD

Mailing Address 51 Flagg Court

City: Staten Island | State: NY | Zip Code: 10304

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 21 / Y Y Y Y 2017

Transaction ID : 8948050

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 252.33

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannada, Lisa, K, , MD

Mailing Address 12872 Willow Pond Court

City: Saint Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Louis Univ School of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 21 / Y Y Y Y 2017

Transaction ID : 8948051

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swenning, Todd, Allen, , MD

Mailing Address 41970 Rancho Manana Lane

City: Rancho Mirage | State: CA | Zip Code: 92270

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Institute of Clinical Orthopedics & Ne
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 810.00

Date of Receipt: M M 11 / D D 21 / Y Y Y Y 2017

Transaction ID : 8948052

Amount of Each Receipt this Period: 90.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mansfield, David, J, , MD

Mailing Address 773 Azalea Pl

City: El Paso | State: TX | Zip Code: 79922

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): El Paso Orthopaedic Surgery Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1174.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8948432

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 258.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCulloch, Patrick, T, , MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Ortho & Rehab

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: 11 / 22 / 2017

Transaction ID : 8948433

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayter, Ronald, G, , MD

Mailing Address 2146 Camden Way

City: Clearwater | State: FL | Zip Code: 33759

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 22 / 2017

Transaction ID : 8948436

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Szczech, Bartlomiej, , , MD

Mailing Address 89 Intervale Way

City: Lake Placid | State: NY | Zip Code: 12946

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Joseph's Hospital Med Ctr

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 11 / 22 / 2017

Transaction ID : 8948437

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Paynter, Thomas, B, , MD

Mailing Address 4900 Deer View Rd NE

City: Cedar Rapids | State: IA | Zip Code: 52411

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Elmendorf Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8948940

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eckrich, Stephen, G J, , MD

Mailing Address 5511 Shooting Star Trail

City: Rapid City | State: SD | Zip Code: 57702

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 835.00

Date of Receipt: M M 11 / D D 23 / Y Y Y Y 2017

Transaction ID : 8948941

Amount of Each Receipt this Period: 83.50

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Navarro, Ronald, Anthony, , MD

Mailing Address 18 Wide Loop Rd

City: Rolling Hills | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente South Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 11 / D D 23 / Y Y Y Y 2017

Transaction ID : 8948942

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 417.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
More, Robert, Cameron, , MD

Mailing Address 8100 Wescott Drive
Suite 101

City: Flemington | State: NJ | Zip Code: 08822

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hunterdon Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 23 / Y Y Y Y 2017

Transaction ID : 8948943

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scales, Darrell, Kevin, , MD

Mailing Address 2000 Tee Dr

City: Braselton | State: GA | Zip Code: 30517-4078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: M M 11 / D D 23 / Y Y Y Y 2017

Transaction ID : 8948944

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lang, Gerald, J, , MD

Mailing Address 1309 Redan Drive

City: Verona | State: WI | Zip Code: 53593

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Wisconsin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 23 / Y Y Y Y 2017

Transaction ID : 8948945

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pavlatos, Christ, J, , MD, MBA

Mailing Address 1301 North Dearborn Unit 804

City: Chicago | State: IL | Zip Code: 60610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt: M M 11 / D D 23 / Y Y Y Y 2017

Transaction ID : 8948946

Amount of Each Receipt this Period: 41.67

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartsock, Langdon, A, , MD

Mailing Address 188 Tradd Street

City: Charleston | State: SC | Zip Code: 29401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Med Univ of SC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 24 / Y Y Y Y 2017

Transaction ID : 8948947

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Malone, Stephen, L, , MD

Mailing Address 923 Westover Rd

City: Wilmington | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopaedic Spine Ctr PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt: M M 11 / D D 24 / Y Y Y Y 2017

Transaction ID : 8948949

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 225.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gerlinger, COL. (ret) Tad, L, , MD

Mailing Address 596 Provident Ave

City: Winnetka | State: IL | Zip Code: 60093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midwest Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 11 / D D 24 / Y Y Y Y 2017

Transaction ID : 8948950

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wills, Christopher, A, , MD

Mailing Address 11622 Vista Mar

City: North Tustin | State: CA | Zip Code: 92705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 25 / Y Y Y Y 2017

Transaction ID : 8949730

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hire, Justin, , , MD

Mailing Address 205 Tremont Drive

City: Waynesville | State: MO | Zip Code: 65583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 462.00

Date of Receipt: M M 11 / D D 25 / Y Y Y Y 2017

Transaction ID : 8949731

Amount of Each Receipt this Period: 42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 376.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Espinoza, Luis, M, , MD

Mailing Address 5 Savannah Ridge Lane

City: Metairie | State: LA | Zip Code: 70001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 930.00

Date of Receipt: M M 11 / D D 25 / Y Y Y Y 2017

Transaction ID : 8949732

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Homlar, Kelly, Cornett, , MD

Mailing Address 3481 Stallings Island Road

City: Martinez | State: GA | Zip Code: 30907

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Augusta University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 25 / Y Y Y Y 2017

Transaction ID : 8949734

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bruse, Laura, Marie, , MD

Mailing Address 944 Everest Peak Avenue

City: Henderson | State: NV | Zip Code: 89012

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Beautiful Bones Ortho
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 25 / Y Y Y Y 2017

Transaction ID : 8949736

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 585.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gay, Andre, Nicolas, , MD

Mailing Address 35550 Monterra Ter Apt 302

City: Union City | State: CA | Zip Code: 94587-8055

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 11 / D D 26 / Y Y Y Y 2017

Transaction ID : 8949737

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Callahan, Bert, C, , MD

Mailing Address 511 N Center St

City: Beaver Dam | State: WI | Zip Code: 53916-3071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fond Du Lac Regional Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 26 / Y Y Y Y 2017

Transaction ID : 8949738

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kennedy, E, Jeff, , MD

Mailing Address 235 Johnstone Dr

City: Madison | State: MS | Zip Code: 39110-7686

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 11 / D D 26 / Y Y Y Y 2017

Transaction ID : 8949739

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooper, Scott, Snow, , MD

Mailing Address 407 NW A St

City: Bentonville | State: AR | Zip Code: 72712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 26 / Y Y Y Y 2017

Transaction ID : 8949740

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McHale, Patricia, , , MD

Mailing Address 15819 Glenmiro Dr

City: Huntersville | State: NC | Zip Code: 28078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 26 / Y Y Y Y 2017

Transaction ID : 8949747

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Van Thiel, Geoffrey, , , MD, MBA

Mailing Address 324 Roxbury Road

City: Rockford | State: IL | Zip Code: 61107

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 26 / Y Y Y Y 2017

Transaction ID : 8949749

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kirol, Bernard, G, , MD

Mailing Address 106 Buckthorn Circle

City: Elgin | State: SC | Zip Code: 29045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics, PA

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8949751

Amount of Each Receipt this Period: 75.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gray, F, Scott, , MD

Mailing Address 25 Olmstead Lane

City: Ridgefield | State: CT | Zip Code: 06877

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Connecticut Family Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951816

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giammattei, Frank, P, , MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Premier Orthopaedic Associates

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951817

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 409.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mitros, Stephen, F, , MD

Mailing Address 51045 Erin Glen Dr

City: Granger | State: IN | Zip Code: 46530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mitros Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 935.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951818

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gary, Joshua, Layne, , MD

Mailing Address 4226 Byron

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951819

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Easley, Mark, E, , MD

Mailing Address Duke Medicine
4709 Creekstone Drive

City: Durham | State: NC | Zip Code: 27703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951820

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carolan, Gregory, Francis, , MD

Mailing Address 1806 Meadow Ridge Ct

City: Bethlehem | State: PA | Zip Code: 18015

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Luke's Ortho Surg Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1124.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951821

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, W, Stanley, , MD

Mailing Address 108 Valerie Dr

City: Lafayette | State: LA | Zip Code: 70508-6008

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951822

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Torres, Daniel, , , MD

Mailing Address 1488 Shelburne Ct

City: Allentown | State: PA | Zip Code: 18104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Texas Med Branch
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 935.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951823

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kelly, James, D, , II, MD

Mailing Address 2351 Clay St Ste 510

City: San Francisco | State: CA | Zip Code: 94115

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8951824

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lesin, Benjamin, E, , MD

Mailing Address 1318 Roxbury Dr Unit 317

City: Los Angeles | State: CA | Zip Code: 90035-4751

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8951961

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moheimani, Assad, M, , MD

Mailing Address 902 N Grand Ave Ste 100

City: Santa Ana | State: CA | Zip Code: 92701

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8951962

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cohen, Jonathan, L, , MD

Mailing Address 407 Crawford Rd

City: Modesto | State: CA | Zip Code: 95356

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Stanislaus Ortho
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8951963

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Darren, L, , MD

Mailing Address 3653 Winding Wood Lane

City: Lexington | State: KY | Zip Code: 40515

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kentucky Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8951964

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baez, Norberto, , , MD

Mailing Address P.O. Box 1019

City: Sabana Grande | State: PR | Zip Code: 00637-1019

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 376.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8951965

Amount of Each Receipt this Period: 188.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1438.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bazih, Jaafar, M, , MD

Mailing Address 2715 S Birmingham Pl

City: Tulsa | State: OK | Zip Code: 74104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tulsa Bone and Joint Assoc

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 27 / 2017

Transaction ID : 8951974

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fernicola, Patrick, Joseph, , MD

Mailing Address 2131 Old River Rd

City: Fortson | State: GA | Zip Code: 31808-2543

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Jack Hughston Memorial Hospital

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 27 / 2017

Transaction ID : 8951976

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coleman, Alexander, C, , MD

Mailing Address 1325 N A St

City: Pensacola | State: FL | Zip Code: 32501-2058

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 27 / 2017

Transaction ID : 8951977

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McMath, Jeffery, A, , MD

Mailing Address 1501 Bright Rd

City: Findlay | State: OH | Zip Code: 45840

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ohio Orthopaedics and Sports Med

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 27 / 2017

Transaction ID : 8951994

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clarke, Eric, Peter, , MD

Mailing Address 111 Windmere Dr

City: Chattanooga | State: TN | Zip Code: 37411

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Scenic City Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 27 / 2017

Transaction ID : 8951997

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lindgren, David, M, , MD

Mailing Address 8001 Chesshire Ln N

City: Maple Grove | State: MN | Zip Code: 55311

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 27 / 2017

Transaction ID : 8951998

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Maki, Neil, J, , MD

Mailing Address 525 St Mary St

City: Thibodaux | State: LA | Zip Code: 70301-2627

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8951999

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bruce, Jeremy, R, , MD

Mailing Address 3249 Reflecting Dr

City: Chattanooga | State: TN | Zip Code: 37415-5656

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTCOM
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8952000

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Elias, David, W, , MD

Mailing Address 196 Grand Lakes

City: Thibodaux | State: LA | Zip Code: 70301

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Sports Specialists of Loui
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8952001

Amount of Each Receipt this Period: 300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannon, David, L, , MD

Mailing Address 2639 Fox Hill Circle East

City: Germantown | State: TN | Zip Code: 38139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Campbell Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 452.00

Date of Receipt: 11 / 22 / 2017
Transaction ID : 8952028

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rosenstein, Alexander, , , MD

Mailing Address PO Box 390400

City: Keauhou | State: HI | Zip Code: 96739

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Charleston Area Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 22 / 2017
Transaction ID : 8952057

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grogan, Thomas, J, , MD

Mailing Address 521 S Westgate Ave

City: Los Angeles | State: CA | Zip Code: 90049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 22 / 2017
Transaction ID : 8952060

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 534.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cordasco, Frank, A, , MD

Mailing Address 40 West 77th St Apt 5B

City: New York | State: NY | Zip Code: 10024

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952061

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rose, Nicholas, E, , MD

Mailing Address 360 San Miguel Dr Ste 701

City: Newport Beach | State: CA | Zip Code: 92660

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952064

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hansen, Uel, , , MD

Mailing Address 73203 E Sundown PR SE

City: Kennewick | State: WA | Zip Code: 99338

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tri-City Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952067

Amount of Each Receipt this Period: 150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 900.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cahill, Edward, L, , MD

Mailing Address 2488 N California St

City: Stockton | State: CA | Zip Code: 95204

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952068

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Murata, Gary, T, , MD

Mailing Address 3334 Schooner Dr

City: Stockton | State: CA | Zip Code: 95219-4564

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952069

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Westin, George, W, , MD

Mailing Address 2488 N California St

City: Stockton | State: CA | Zip Code: 95204

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Alpine Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952070

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Le, Anh, X, , MD

Mailing Address 3650 Gleneagles Dr

City: Stockton | State: CA | Zip Code: 95219-1824

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952071

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kawaguchi, Alan, T, , MD

Mailing Address 5121 Doverton Dr

City: Stockton | State: CA | Zip Code: 95219

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orhopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952072

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Salamon, Peter, B, , MD

Mailing Address 6950 Cumberland Place

City: Stockton | State: CA | Zip Code: 95219

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952086

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eager, Steven, , , MD

Mailing Address 4494 Winding River Circle

City: Stockton | State: CA | Zip Code: 95219-8258

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952087

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Winter, Roland, H, , MD

Mailing Address 5660 E Acorn Ct

City: Stockton | State: CA | Zip Code: 95212

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Alpine Orthopaedic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8952088

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lindaman, Matthew, R, , DO

Mailing Address 2130 E Stonebrook Ln

City: Eldridge | State: IA | Zip Code: 52748

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8952209

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mollano, Anthony, V, , MD

Mailing Address 163 Galloping Hill Rd

City: Contoocook | State: NH | Zip Code: 03229-3401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Concord Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 11 / 30 / 2017
Transaction ID : 8952236

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Colville, Mark, R, , MD

Mailing Address 2375 NW Overton St

City: Portland | State: OR | Zip Code: 97210

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): SWMC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 11 / 30 / 2017
Transaction ID : 8952237

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McKinney, James, D, , MD

Mailing Address 3131 Brown's Mill Rd

City: Cookeville | State: TN | Zip Code: 38506

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Upper Cumberland Ortho
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 11 / 29 / 2017
Transaction ID : 8953770

Amount of Each Receipt this Period: 375.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2375.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kramer, Warren, G, , III, MD

Mailing Address 1401 Avocado Ave Ste 307

City: Newport Beach | State: CA | Zip Code: 92660-8732

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953772

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sidor, Michael, L, , MD

Mailing Address 35 Kingston Rd

City: Media | State: PA | Zip Code: 19063

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Co-ord Med Network
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953773

Amount of Each Receipt this Period: 175.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Teter, Kenneth, E, , MD

Mailing Address 3609 SW Kings Forest Rd

City: Topeka | State: KS | Zip Code: 66610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tallgrass Orthopaedic and Sports Medic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953774

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 925.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCraney, William, Owen, , MD

Mailing Address 1619 Poplar Blvd

City: Jackson | State: MS | Zip Code: 39202

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953775

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tymon, Timothy, Patrick, , MD

Mailing Address 231 Granite Run Dr Ste 100

City: Lancaster | State: PA | Zip Code: 17601-6816

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Lancaster Ortho Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953777

Amount of Each Receipt this Period: 375.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sprague, Mark, A, , MD

Mailing Address 8 Yale Hill Rd

City: Stockbridge | State: MA | Zip Code: 01262

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Berkshire Orthopaedic Associates
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953780

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1625.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Urbanek, Paul, J, , MD

Mailing Address 264 Pleasant St

City: Concord | State: NH | Zip Code: 03301-2562

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Concord Orthopaedics, PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 29 / 2017
Transaction ID : 8953782

Amount of Each Receipt this Period: 225.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tejwani, Nirmal, C, , MD

Mailing Address 84 Northwood Ave

City: Demarest | State: NJ | Zip Code: 07627

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Hospital for Joint Diseases
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 29 / 2017
Transaction ID : 8953799

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Riley, Joseph, , MD

Mailing Address 1200 5th Ave #8A

City: New York | State: NY | Zip Code: 10029

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hospital For Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 29 / 2017
Transaction ID : 8953800

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 725.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cash, Andrew, Miller, , MD

Mailing Address 9339 W Sunset Rd Ste 100

City: Las Vegas | State: NV | Zip Code: 89148

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Desert Institue
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953802

Amount of Each Receipt this Period: 400.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kofoed, John, Charles, , MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sutter Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953815

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Johnson, Miers, C, , III, MD

Mailing Address 14500 W Lewis Lane

City: Nampa | State: ID | Zip Code: 83686

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Treasure Valley Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953816

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pierce, Troy, D, , MD

Mailing Address 4012 Edgewater Pl SE

City: Mandan | State: ND | Zip Code: 58554

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Bone & Joint Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953817

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fankhauser, Richard, A, , MD

Mailing Address 815 W Broad St Ste 300

City: Columbus | State: OH | Zip Code: 43222-1465

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953818

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Latimer, Earl, A, , III, MD

Mailing Address 115 E 19th St

City: Roswell | State: NM | Zip Code: 88201-5151

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): SCOR, PC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953820

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kozanek, Michael, , , MD

Mailing Address 4 Longfellow Place
Apt 3202

City: Boston | State: MA | Zip Code: 02114

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excel Orthopaedic Specialists
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953821

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dunn, Albert, , , DO

Mailing Address 11109 Nicoles Way

City: Chardon | State: OH | Zip Code: 44024-9383

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Precision Orthopaedic Specialties, Inc
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953822

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rankin, Glenn, B, , MD

Mailing Address 651 N Granados Ave

City: Solana Beach | State: CA | Zip Code: 92075

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Southern California Permanente Medical
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953824

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Drake, John, Kirk, , MD

Mailing Address 12018 Oak Hollow

City: Van Cleave | State: MS | Zip Code: 39565

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953828

Amount of Each Receipt this Period: 500.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coward, David, B, , MD

Mailing Address 2801 K St Ste 310

City: Sacramento | State: CA | Zip Code: 95816-5119

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sacramento Knee & Sports Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953830

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Reagan, Kevin, J, , MD

Mailing Address 35 Kennedy Dr

City: Putnam | State: CT | Zip Code: 06260

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Center For Bone & Joint Care
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8953831

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sherbondy, Paul, Strawn, , MD

Mailing Address 507 Beaumont Drive

City: State College | State: PA | Zip Code: 16801

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 01 / Y Y Y Y 2017

Transaction ID : 8953965

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rungee, James, L, , MD

Mailing Address 2802 Pavilion Pl

City: Murfreesboro | State: TN | Zip Code: 37129

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Tennessee Orthopedic Alliance
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 12 / D D 01 / Y Y Y Y 2017

Transaction ID : 8953966

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Early, John, S, , MD

Mailing Address 8210 Walnut Hill Ln Ste 130

City: Dallas | State: TX | Zip Code: 75231

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): Texas Orthopaedic Associates
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: M M 12 / D D 01 / Y Y Y Y 2017

Transaction ID : 8953967

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1184.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cassidy, Carter, , , MD

Mailing Address 4890 Faulkirk Ln

City: Lexington | State: KY | Zip Code: 40515

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Kentucky Res Program

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: M M 12 / D D 01 / Y Y Y Y 2017

Transaction ID : 8953968

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kwong, Louis, M, , MD

Mailing Address PO Box 422
1000 W Carson St

City: Torrance | State: CA | Zip Code: 90509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 02 / Y Y Y Y 2017

Transaction ID : 8955607

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Uppal, Renny, , , MD

Mailing Address 1730 Sharpe Hill Circle

City: Reno | State: NV | Zip Code: 89523-3924

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 02 / Y Y Y Y 2017

Transaction ID : 8955608

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Brophy, Robert, H, , MD

Mailing Address 7 Maryhill Dr

City: St Louis | State: MO | Zip Code: 63124

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Washington University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 02 / 2017
Transaction ID : 8955610

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Floyd, Mark, , , MD

Mailing Address 330 Turner McCall Blvd

City: Rome | State: GA | Zip Code: 30165

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Harbin Clinic, LLC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 02 / 2017
Transaction ID : 8955635

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wyatt, Ronald, W B, , MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 12 / 03 / 2017
Transaction ID : 8955858

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 850.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hinchey, John, William, , MD

Mailing Address 409 Normandy Ave

City: San Antonio | State: TX | Zip Code: 78209

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 04 / Y Y Y Y 2017

Transaction ID : 8955866

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Santore, Richard, F, , MD

Mailing Address PO Box 7016

City: Rancho Santa Fe | State: CA | Zip Code: 92067

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sharp Healthcare Hip Preservation Cent
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 04 / Y Y Y Y 2017

Transaction ID : 8955867

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mosley, Emmett, Wayne, , MD

Mailing Address 1309 Upland Crest Ct

City: Gulf Breeze | State: FL | Zip Code: 32563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 12 / D D 04 / Y Y Y Y 2017

Transaction ID : 8955868

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stulberg, Bernard, N, , MD

Mailing Address 7470 Waterfall Trail

City: Chagrin Falls | State: OH | Zip Code: 44022

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Vincent Charty Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8956431

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jiranek, William, A, , MD

Mailing Address 4066 Old River Trail

City: Powhatan | State: VA | Zip Code: 23139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 11 / D D 22 / Y Y Y Y 2017

Transaction ID : 8956432

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Besh, Basil, R, , MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): FORM Hand, Wrist & Elbow Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 24 / Y Y Y Y 2017

Transaction ID : 8956434

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swayze, Orrin, Scott, , MD

Mailing Address 1601 West Wesley Road

City: Atlanta | State: GA | Zip Code: 30327

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8956435

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damalas, Dino, , ,

Mailing Address 9400 Higgins Rd

City: Rosemont | State: IL | Zip Code: 60018-4974

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): AAOS
Occupation (for Individual): Chief Operations Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017

Transaction ID : 8956436

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stephenson, John, Michael, , MD

Mailing Address 23 Hickory Creek Dr

City: Little Rock | State: AR | Zip Code: 72212-2509

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Arkansas For Medical Sci
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8956437

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iorio, Richard, , , MD

Mailing Address 1 Indian Hill Road

City: New Rochelle | State: NY | Zip Code: 10804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 772.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8956438

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mejia, Alfonso, , , MD, MPH

Mailing Address 5332 South Shore Drive

City: Chicago | State: IL | Zip Code: 60615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Association of Orthopedic Sur
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: M M 11 / D D 28 / Y Y Y Y 2017

Transaction ID : 8956439

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Epps, Howard, R, , MD

Mailing Address 1936 Wroxton Road

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Baylor College of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 11 / D D 30 / Y Y Y Y 2017

Transaction ID : 8956440

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waddell, Bradford, Sutton, , MD

Mailing Address 235 North Regent St.

City: Port Chester | State: NY | Zip Code: 10573

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: M M 11 / D D 30 / Y Y Y Y 2017

Transaction ID : 8956441

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Khanuja, Harpal, Singh, , MD

Mailing Address 1 Ridge Farm Court

City: Cockeysville | State: MD | Zip Code: 21030

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): John Hopkins University, Department of
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: M M 11 / D D 30 / Y Y Y Y 2017

Transaction ID : 8956442

Amount of Each Receipt this Period: 21.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rothrock, Corey, Patrick, , MD

Mailing Address 2600 Old Orchard Trail

City: Sioux Falls | State: SD | Zip Code: 57103

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sioux Falls Specialty Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 04 / Y Y Y Y 2017

Transaction ID : 8956756

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 605.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Daniel, Richard, , MD

Mailing Address 654 W Sawgrass Trail

City: Dakota Dunes | State: SD | Zip Code: 57049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): CNOS
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt: 12 / 05 / 2017
Transaction ID : 8956865

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nguyen, Vuong, B, , MD

Mailing Address 3120 Downs Cove Rd

City: Windermere | State: FL | Zip Code: 34786

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 05 / 2017
Transaction ID : 8956875

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kane, Steven, Montgomery, , MD

Mailing Address 1592 Windsor Pkwy

City: Atlanta | State: GA | Zip Code: 30319

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Atlanta Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 05 / 2017
Transaction ID : 8957223

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Farber, Daniel, C, , MD

Mailing Address 300 Fairhill Rd

City: Wynnewood | State: PA | Zip Code: 19096-1804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Penn Medicine Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 06 / 2017
Transaction ID : 8957809

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Green, Daniel, William, , MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt: 12 / 07 / 2017
Transaction ID : 8958434

Amount of Each Receipt this Period: 175.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Garner, Richard, W, , MD

Mailing Address 7201 E Chester Heights Circle

City: Anchorage | State: AK | Zip Code: 99504-3563

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt: 12 / 07 / 2017
Transaction ID : 8958435

Amount of Each Receipt this Period: 85.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hildebrand, Randall, , , MD

Mailing Address 1711 Lincoln St

City: Great Bend | State: KS | Zip Code: 67530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8958436

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Tyndall, William, A, , MD

Mailing Address 123 Brittany Ln

City: Hollidaysburg | State: PA | Zip Code: 16648

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1088.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8958437

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Joel, D, , MD

Mailing Address Tucson Shoulder Elbow & Hand
3972 N Campbell Ave

City: Tucson | State: AZ | Zip Code: 85719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Tucson Shoulder Elbow & Hand
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8958438

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dacre, Alan, , , MD

Mailing Address 141 Country Acres Road

City: Riverton | State: WY | Zip Code: 82501

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): OrthoMontana
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 12 / 07 / 2017
Transaction ID : 8959105

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Elliott, James, S, , MD

Mailing Address 3616 Timberline Dr

City: Billings | State: MT | Zip Code: 59102

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 07 / 2017
Transaction ID : 8959106

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Klepps, Steve, , , MD

Mailing Address 2006 Eastridge Dr

City: Billings | State: MT | Zip Code: 59102

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Montana Ortho & Sports Med
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 07 / 2017
Transaction ID : 8959107

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McDowell, Gregory, S, , MD

Mailing Address 2900 12th Ave N Ste 140W

City: Billings | State: MT | Zip Code: 59101-7503

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Montana
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959108

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Roccisano, Anthony, W, , DO

Mailing Address 2704 Gregory Dr S

City: Billings | State: MT | Zip Code: 59102

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Montana
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959109

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scheer, Zachary, Boyer, , MD

Mailing Address 2440 Lydia Ln

City: Billings | State: MT | Zip Code: 59102-7958

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959111

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

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Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Settergren, Curtis, R, , MD

Mailing Address 2937 MacLeod St

City: Billings | State: MT | Zip Code: 59106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Yellowstone Med Ctr W

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959112

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sukin, Dean, C, , MD

Mailing Address 2623 Huckleberry Ln N

City: Billings | State: MT | Zip Code: 59106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Montana

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959113

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wilson, John, R, , MD

Mailing Address 2900 12th Ave N St 100E

City: Billings | State: MT | Zip Code: 59101

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959114

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yorgason, Michael, Ren, , MD

Mailing Address 4714 South Woodhaven Way

City: Billings | State: MT | Zip Code: 59106

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959115

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harrah, Daniel, R, , MD

Mailing Address 3220 Hospital Dr

City: Juneau | State: AK | Zip Code: 99801

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959118

Amount of Each Receipt this Period: 2000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DellaMaggiore, Eugene, D, , MD

Mailing Address 1214 Sierra Ave

City: San Jose | State: CA | Zip Code: 95126

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): O'Connor Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959119

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3250.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Papa, John, A, , MD

Mailing Address 1440 Hibiscus Ave

City: Winter Park | State: FL | Zip Code: 32789

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Jewett Orthopaedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959120

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Connolly, Edward, Adrian, , MD

Mailing Address 2300 53rd Ave Ste LL04

City: Bettendorf | State: IA | Zip Code: 52722-7565

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho & Rheumatology Assoc.
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959121

Amount of Each Receipt this Period: 375.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Humphreys, Steven, Craig, , MD

Mailing Address 935 Keystone Dr

City: Soldotna | State: AK | Zip Code: 99669

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kenai Spine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959122

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1125.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shenton, David, W, , Jr, MD

Mailing Address 3134 Sycamore Ln

City: Billings | State: MT | Zip Code: 59102-0524

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Montana
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959123

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Anderson, Jeffrey, John, , MD

Mailing Address 333 O'Connor Dr

City: San Jose | State: CA | Zip Code: 95128-1623

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959124

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Portland, Gregory, H, , MD

Mailing Address 666 Garland Ave

City: Winnetka | State: IL | Zip Code: 60093

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959125

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Collazo-Bonilla, Jose, A, , MD

Mailing Address EDIF Prof Hospital Menonita
Ste 306

City: Aibonito | State: PR | Zip Code: 00705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959127

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hearon, Bernard, F, , MD

Mailing Address 801 N. St. Andrews St.

City: Wichita | State: KS | Zip Code: 67230

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 07 / Y Y Y Y 2017

Transaction ID : 8959128

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Diveris, John, M, , MD

Mailing Address 2502 Ashbourne Ct

City: Valparaiso | State: IN | Zip Code: 46385

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Diveris Orthopedics and Sports Medicin
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 08 / Y Y Y Y 2017

Transaction ID : 8963602

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bugbee, William, , , MD

Mailing Address 13219 Winstanley Way

City: San Diego | State: CA | Zip Code: 92130

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Scripps Clinic Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 08 / Y Y Y Y 2017

Transaction ID : 8963604

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wright, Geoffrey, A, , MD

Mailing Address 4229 Foxxglen Run

City: Chesapeake | State: VA | Zip Code: 23321

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sports Medicine & Orthopedic Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 12 / D D 08 / Y Y Y Y 2017

Transaction ID : 8963606

Amount of Each Receipt this Period: 300.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Starecki, Mikael, , , MD

Mailing Address 1755 Wildwood Rd NE

City: Atlanta | State: GA | Zip Code: 30306-3018

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 08 / Y Y Y Y 2017

Transaction ID : 8963608

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Clain, Michael, R, , MD

Mailing Address 9 Indian Head Rd

City: Riverside | State: CT | Zip Code: 06878

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 09 / Y Y Y Y 2017

Transaction ID : 8964177

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Rawlings, John, M, , MD

Mailing Address 89 Whitaker Way N

City: Richmond Hill | State: GA | Zip Code: 31324

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Madigan Healthcare System
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: M M 12 / D D 09 / Y Y Y Y 2017

Transaction ID : 8964178

Amount of Each Receipt this Period: 25.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Braaton, Paul, J, , MD

Mailing Address 1335 Coffee Rd Ste 100

City: Modesto | State: CA | Zip Code: 95355

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1074.00

Date of Receipt: M M 12 / D D 09 / Y Y Y Y 2017

Transaction ID : 8964179

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 193.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ellis, Thomas, J, , MD

Mailing Address 5190 Harlem Road

City: New Albany | State: OH | Zip Code: 43054

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 10 / Y Y Y Y 2017

Transaction ID : 8964180

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lintecum, Neal, D, , MD

Mailing Address 789 N 1500 Road

City: Lawrence | State: KS | Zip Code: 66049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: M M 12 / D D 10 / Y Y Y Y 2017

Transaction ID : 8964181

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Barronian, Alan, D, , MD

Mailing Address 705 SW 174th Pl

City: Normandy Park | State: WA | Zip Code: 98166

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 11 / Y Y Y Y 2017

Transaction ID : 9457088

Amount of Each Receipt this Period: 500.00

☐ Memo Item

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Teuscher, David, , , MD

Mailing Address PO Box 26

City: Paige | State: TX | Zip Code: 78659

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 12 / Y Y Y Y 2017

Transaction ID : 9457089

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wicks, Brian, P, , MD

Mailing Address 12784 Silverdale Way

City: Silverdale | State: WA | Zip Code: 98383-7714

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Doctors Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 12 / Y Y Y Y 2017

Transaction ID : 9457670

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bakker, Dirk, A, , MD

Mailing Address 9097 Lakeshore Dr

City: West Olive | State: MI | Zip Code: 49460

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 14 / Y Y Y Y 2017

Transaction ID : 9458388

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Banwart, J, Christopher, , MD

Mailing Address 3130 Skelley Ct

City: Joplin | State: MO | Zip Code: 64804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 15 / Y Y Y Y 2017

Transaction ID : 9458837

Amount of Each Receipt this Period: 1000.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Bryan, Scott, , MD

Mailing Address 1026 Split Elm Drive

City: Missouri City | State: TX | Zip Code: 77459

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UTMDACC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1168.00

Date of Receipt: M M 12 / D D 16 / Y Y Y Y 2017

Transaction ID : 9460310

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hussain, Suleman, M, , MD

Mailing Address 2300 53rd Street, Suite #100

City: Bettendorf | State: IA | Zip Code: 52804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): ORA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 16 / Y Y Y Y 2017

Transaction ID : 9460311

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1168.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Snyder, Matthew, J, , MD

Mailing Address 14912 Chopine Pass

City: Roanoke | State: IN | Zip Code: 46783-9308

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopedic Hospital of Lutheran He

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt: 12 / 16 / 2017

Transaction ID : 9460312

Amount of Each Receipt this Period: 85.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Matthew, R, , MD

Mailing Address 920 Avenue B

City: Marrero | State: LA | Zip Code: 70072

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: 12 / 16 / 2017

Transaction ID : 9460313

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linschoten, Niels, J, , MD

Mailing Address 11428 Center Court Blvd

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 924.00

Date of Receipt: 12 / 16 / 2017

Transaction ID : 9460314

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Harris, Ryan, N, , DO

Mailing Address 1686 Turnberry Ln

City: Riner | State: VA | Zip Code: 24149-2571

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 16 / Y Y Y Y 2017

Transaction ID : 9460316

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hayden, Shawn, A, , MD

Mailing Address 5124 Marble Falls Ln

City: Plano | State: TX | Zip Code: 75093-7545

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: M M 12 / D D 17 / Y Y Y Y 2017

Transaction ID : 9460525

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hunt, Stephen, Austin, , MD

Mailing Address 7 Pheasant Run Dr

City: Basking Ridge | State: NJ | Zip Code: 07920

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 12 / D D 17 / Y Y Y Y 2017

Transaction ID : 9460526

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Raut, Sourendra, Sean, , MD

Mailing Address 6020 Falls Landing Drive

City: Cumming | State: GA | Zip Code: 30040

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 18 / Y Y Y Y 2017

Transaction ID : 9460530

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pula, David, A, , MD

Mailing Address 16 Evergreen Trail

City: Orchard Park | State: NY | Zip Code: 14127

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excelsior Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 12 / D D 18 / Y Y Y Y 2017

Transaction ID : 9460531

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shah, Roshan, P, , MD, JD

Mailing Address 610 West 110th Street
Apt 3E

City: New York | State: NY | Zip Code: 10025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Columbia University Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2017

Transaction ID : 9461291

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Coles, Robert, E, , MD

Mailing Address 201 Lands End Rd

City: Morehead City | State: NC | Zip Code: 28557

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Carolinas Center For Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2017

Transaction ID : 9461292

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scher, David, M, , MD

Mailing Address 444 East 86th St Apt 12G

City: New York | State: NY | Zip Code: 10028

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hosp for Special Surgery
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2017

Transaction ID : 9461310

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kamps, Bryan, Scott, , MD

Mailing Address 3741 Monarch Dr NE

City: Grand Rapids | State: MI | Zip Code: 49525

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Spectrum Health Medical Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 12 / D D 14 / Y Y Y Y 2017

Transaction ID : 9461311

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 284.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lapkass, John, E, , MD

Mailing Address 1426 G St

City: Anchorage | State: AK | Zip Code: 99501

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Anchorage Fracture & Ortho Clinic

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 14 / Y Y Y Y 2017

Transaction ID : 9461312

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cole, J, Dean, , MD

Mailing Address 500 Lakeview St

City: Orlando | State: FL | Zip Code: 32804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 14 / Y Y Y Y 2017

Transaction ID : 9461314

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Smith, C, Daniel, , DO

Mailing Address 2501 Gene Field Rd

City: Saint Joseph | State: MO | Zip Code: 64506-1613

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 14 / Y Y Y Y 2017

Transaction ID : 9461316

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Potter, Benjamin, Kyle, , MD

Mailing Address 4508 Maple Avenue

City: Bethesda | State: MD | Zip Code: 20814

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Walter Reed National Military Medical

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 14 / 2017

Transaction ID : 9461317

Amount of Each Receipt this Period: 200.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ugino, Michael, R, , MD

Mailing Address 1910 Blanding St

City: Columbia | State: SC | Zip Code: 29201-3520

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics & Neurosurgery

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 12 / 14 / 2017

Transaction ID : 9461319

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nunley, James, Albert, , II, MD

Mailing Address 4709 Creekstone Drive, Suite 200

City: Durham | State: NC | Zip Code: 27703-0016

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 14 / 2017

Transaction ID : 9461320

Amount of Each Receipt this Period: 500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 900.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lopez, David, Vincent, , MD

Mailing Address 27 Courtney Ct

City: Freehold | State: NJ | Zip Code: 07728

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic & Sports Medicine Speciali

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 01 / 2017

Transaction ID : 9461346

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nace, James, , , DO, PT

Mailing Address 12993 Jerome Jay Drive

City: Cockeysville | State: MD | Zip Code: 21030

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Sinai Hospital-Rubin Institute For Adv

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 12 / 01 / 2017

Transaction ID : 9461347

Amount of Each Receipt this Period: 750.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Blotter, Robert, H, , MD

Mailing Address 1414 W Fair Ave Ste 190

City: Marquette | State: MI | Zip Code: 49855-2693

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Center of Orthopedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 12 / 04 / 2017

Transaction ID : 9461351

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1084.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vessely, Michael, B, , MD

Mailing Address 522 Second St

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Willamette Valley Medical Center-
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 04 / Y Y Y Y 2017
Transaction ID : 9461352

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sheehan, John, P, , MD

Mailing Address 6621 Cuming St

City: Omaha | State: NE | Zip Code: 68132

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Boys Town
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 06 / Y Y Y Y 2017
Transaction ID : 9461389

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Keeney, James, A, , MD

Mailing Address 1106 Shallow Ridge Circle

City: Columbia | State: MO | Zip Code: 65201

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Missouri Orthopaedic Instit
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 06 / Y Y Y Y 2017
Transaction ID : 9461391

Amount of Each Receipt this Period: 250.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Melamed, Hooman, Meir, , MD

Mailing Address 2109 Ridge Drive

City: Los Angeles | State: CA | Zip Code: 90049

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 12 / D D 12 / Y Y Y Y 2017

Transaction ID : 9461411

Amount of Each Receipt this Period: 750.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shen, Wen, , , MD

Mailing Address 33 Pond Hills Ct

City: Pleasant Valley | State: NY | Zip Code: 12569

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic Associates of Dutchess Coun
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 20 / Y Y Y Y 2017

Transaction ID : 9461460

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Owen, K, Kip, , MD

Mailing Address 5111 N 10th St # 268

City: McAllen | State: TX | Zip Code: 78504

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 20 / Y Y Y Y 2017

Transaction ID : 9461461

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Leinberry, Charles, F, , MD

Mailing Address 205 Worstall Alley

City: Newtown | State: PA | Zip Code: 18940

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rothman Orthopaedic Specialty Hospital

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 20 / 2017

Transaction ID : 9462671

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chandler, David, R, , MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt: 12 / 21 / 2017

Transaction ID : 9462680

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Chapman, Cary, B, , MD

Mailing Address 51 Flagg Court

City: Staten Island | State: NY | Zip Code: 10304

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 21 / 2017

Transaction ID : 9462682

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 669.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannada, Lisa, K, , MD

Mailing Address 12872 Willow Pond Court

City: Saint Louis | State: MO | Zip Code: 63131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Louis Univ School of Medicine
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 21 / Y Y Y Y 2017

Transaction ID : 9462683

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Swenning, Todd, Allen, , MD

Mailing Address 41970 Rancho Manana Lane

City: Rancho Mirage | State: CA | Zip Code: 92270

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Institute of Clinical Orthopedics & Ne
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: M M 12 / D D 21 / Y Y Y Y 2017

Transaction ID : 9462684

Amount of Each Receipt this Period: 90.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Dalury, David, F, , MD

Mailing Address 8322 Bellona Ave Ste 200

City: Baltimore | State: MD | Zip Code: 21204-2076

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Towson Orthopaedic Associates
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 21 / Y Y Y Y 2017

Transaction ID : 9462696

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1174.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Della Valle, Craig, J, , MD

Mailing Address 453 W Deming Pl

City: Chicago | State: IL | Zip Code: 60614-1718

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Rush University Med Ctr

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 21 / 2017

Transaction ID : 9462698

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jones, David, Turner, , MD

Mailing Address 3801 Wake Forest Road
Suite 220

City: Raleigh | State: NC | Zip Code: 27609

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 19 / 2017

Transaction ID : 9462973

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Geissler, William, Bennett, , MD

Mailing Address 67 Terrapin Dr

City: Brandon | State: MS | Zip Code: 39042

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 19 / 2017

Transaction ID : 9462974

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Paterson, William, Hunt, , MD

Mailing Address 120 E Carver Rd

City: Tempe | State: AZ | Zip Code: 85284-2302

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Arizona Spine & Joint Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 19 / 2017
Transaction ID : 9462975

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wollaeger, John, K, , MD

Mailing Address 1624 S High Point Rd

City: Madison | State: WI | Zip Code: 53719

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): UW Health Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 19 / 2017
Transaction ID : 9462988

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bacilla, Phillip, R, , Jr, MD

Mailing Address 399 Cattle Drive

City: Opelousas | State: LA | Zip Code: 70570

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Opelousas Orthopaedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 19 / 2017
Transaction ID : 9462990

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schafer, Michael, F, , MD

Mailing Address 1815 W Ridgewood Lane

City: Glenview | State: IL | Zip Code: 60025

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Northwestern Medical
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2017

Transaction ID : 9462991

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Currier, Bradford, L, , MD

Mailing Address 200 First St SW
Dept of Ortho Surg

City: Rochester | State: MN | Zip Code: 55905

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mayo Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2017

Transaction ID : 9462992

Amount of Each Receipt this Period: 200.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kindsfater, Kirk, , , MD

Mailing Address 16285 CR 76

City: Eaton | State: CO | Zip Code: 80615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2017

Transaction ID : 9462993

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[x] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Russell, George, V, , Jr, MD

Mailing Address 102 Hawthorne Vale

City: Ridgeland | State: MS | Zip Code: 39157

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Univ of Mississippi Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 12 / 21 / 2017
Transaction ID : 9463004

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mansfield, David, J, , MD

Mailing Address 773 Azalea Pl

City: El Paso | State: TX | Zip Code: 79922

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): El Paso Orthopaedic Surgery Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1258.00

Date of Receipt: 12 / 22 / 2017
Transaction ID : 9466683

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCulloch, Patrick, T, , MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Advanced Ortho & Rehab
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 22 / 2017
Transaction ID : 9466684

Amount of Each Receipt this Period: 84.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Szczech, Bartlomiej, , , MD

Mailing Address 89 Intervale Way

City: Lake Placid | State: NY | Zip Code: 12946

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Joseph's Hospital Med Ctr
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 12 / 22 / 2017
Transaction ID : 9466686

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bear, Brian, Jeffrey, , MD

Mailing Address 324 Roxbury Rd

City: Rockford | State: IL | Zip Code: 61107

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 12 / 22 / 2017
Transaction ID : 9467389

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Eckrich, Stephen, G J, , MD

Mailing Address 5511 Shooting Star Trail

City: Rapid City | State: SD | Zip Code: 57702

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 918.50

Date of Receipt: 12 / 23 / 2017
Transaction ID : 9467478

Amount of Each Receipt this Period: 83.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 683.50

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Navarro, Ronald, Anthony, , MD

Mailing Address 18 Wide Loop Rd

City: Rolling Hills | State: CA | Zip Code: 90274

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Kaiser Permanente South Bay
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: M M 12 / D D 23 / Y Y Y Y 2017

Transaction ID : 9467479

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
More, Robert, Cameron, , MD

Mailing Address 8100 Wescott Drive
Suite 101

City: Flemington | State: NJ | Zip Code: 08822

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Hunterdon Orthopaedic Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 23 / Y Y Y Y 2017

Transaction ID : 9467480

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Scales, Darrell, Kevin, , MD

Mailing Address 2000 Tee Dr

City: Braselton | State: GA | Zip Code: 30517-4078

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: M M 12 / D D 23 / Y Y Y Y 2017

Transaction ID : 9467481

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 268.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Moon, Daniel, K, , MBA, MD, M

Mailing Address 4964 Akron St

City: Denver | State: CO | Zip Code: 80238

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Washington University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 23 / Y Y Y Y 2017

Transaction ID : 9467482

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Pavlatos, Christ, J, , MD, MBA

Mailing Address 1301 North Dearborn Unit 804

City: Chicago | State: IL | Zip Code: 60610

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): IBJI
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 416.70

Date of Receipt: M M 12 / D D 23 / Y Y Y Y 2017

Transaction ID : 9467483

Amount of Each Receipt this Period: 41.67

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hartsock, Langdon, A, , MD

Mailing Address 188 Tradd Street

City: Charleston | State: SC | Zip Code: 29401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Med Univ of SC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 24 / Y Y Y Y 2017

Transaction ID : 9467488

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 375.67

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Malone, Stephen, L, , MD

Mailing Address 923 Westover Rd

City: Wilmington | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): The Orthopaedic Spine Ctr PA

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt: M M 12 / D D 24 / Y Y Y Y 2017

Transaction ID : 9467489

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kozanek, Michael, , , MD

Mailing Address 4 Longfellow Place
Apt 3202

City: Boston | State: MA | Zip Code: 02114

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Excel Orthopaedic Specialists

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: M M 12 / D D 24 / Y Y Y Y 2017

Transaction ID : 9467491

Amount of Each Receipt this Period: 100.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wills, Christopher, A, , MD

Mailing Address 11622 Vista Mar

City: North Tustin | State: CA | Zip Code: 92705

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic Specialty Institute

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 25 / Y Y Y Y 2017

Transaction ID : 9467492

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 284.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hire, Justin, , , MD

Mailing Address 205 Tremont Drive

City: Waynesville | State: MO | Zip Code: 65583

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: M M 12 / D D 25 / Y Y Y Y 2017

Transaction ID : 9467493

Amount of Each Receipt this Period: 42.00

[ ] Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Espinoza, Luis, M, , MD

Mailing Address 5 Savannah Ridge Lane

City: Metairie | State: LA | Zip Code: 70001

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1015.00

Date of Receipt: M M 12 / D D 25 / Y Y Y Y 2017

Transaction ID : 9467494

Amount of Each Receipt this Period: 85.00

[ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gay, Andre, Nicolas, , MD

Mailing Address 35550 Monterra Ter Apt 302

City: Union City | State: CA | Zip Code: 94587-8055

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9468416

Amount of Each Receipt this Period: 100.00

[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 227.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Callahan, Bert, C, , MD

Mailing Address 511 N Center St

City: Beaver Dam | State: WI | Zip Code: 53916-3071

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Fond Du Lac Regional Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9468417

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hogan, MaCalus, Vinson, , MD

Mailing Address 106 Field Brook Lane

City: Gibsonia | State: PA | Zip Code: 15044

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Pittsburgh Medical Cente
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9468418

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cooper, Scott, Snow, , MD

Mailing Address 407 NW A St

City: Bentonville | State: AR | Zip Code: 72712

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mercy Clinic Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9468419

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kirol, Bernard, G, , MD

Mailing Address 106 Buckthorn Circle

City: Elgin | State: SC | Zip Code: 29045

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Midlands Orthopaedics, PA
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9468458

Amount of Each Receipt this Period: 75.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hettrich, Carolyn, , , MD, MPH

Mailing Address 2983 Oliver Lane NE

City: Iowa City | State: IA | Zip Code: 52240

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Iowa Sports Medicine Cen
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9468459

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thompson, Matthew, Michael, , MD

Mailing Address 3727 Albemarle St NW

City: Washington | State: DC | Zip Code: 20016

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Drisko, Fee & Parkins
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9468460

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 575.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Noordsij, Peter, G, , MD

Mailing Address PO Box 1909

City: New London | State: NH | Zip Code: 03257

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9468465

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kozar, Brian, E, , MD

Mailing Address 17718 Master Pointe Court

City: Baton Rouge | State: LA | Zip Code: 70810

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Health System
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9469074

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kennedy, Thomas, C, , MD

Mailing Address 1106 Pecks Canyon

City: Yakima | State: WA | Zip Code: 98908

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9469285

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giammattei, Frank, P, , MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Premier Orthopaedic Associates

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 28 / 2017

Transaction ID : 9469296

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mitros, Stephen, F, , MD

Mailing Address 51045 Erin Glen Dr

City: Granger | State: IN | Zip Code: 46530

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Mitros Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt: 12 / 28 / 2017

Transaction ID : 9469297

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Gary, Joshua, Layne, , MD

Mailing Address 4226 Byron

City: Houston | State: TX | Zip Code: 77005

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 28 / 2017

Transaction ID : 9469298

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 253.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Easley, Mark, E, , MD

Mailing Address Duke Medicine
4709 Creekstone Drive

City: Durham | State: NC | Zip Code: 27703

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 28 / 2017
Transaction ID : 9469299

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Fontanetta, A, Philip, , MD

Mailing Address 700 Hunt Ln

City: Manhasset | State: NY | Zip Code: 11030

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 28 / 2017
Transaction ID : 9469300

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Carolan, Gregory, Francis, , MD

Mailing Address 1806 Meadow Ridge Ct

City: Bethlehem | State: PA | Zip Code: 18015

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): St Luke's Ortho Surg Group
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1208.00

Date of Receipt: 12 / 28 / 2017
Transaction ID : 9469301

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Foster, W, Stanley, , MD

Mailing Address 108 Valerie Dr

City: Lafayette | State: LA | Zip Code: 70508-6008

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 28 / 2017

Transaction ID : 9469302

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Torres, Daniel, , , MD

Mailing Address 1488 Shelburne Ct

City: Allentown | State: PA | Zip Code: 18104

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): University of Texas Med Branch
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt: 12 / 28 / 2017

Transaction ID : 9469303

Amount of Each Receipt this Period: 85.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Razi, Afshin, , , MD

Mailing Address 2 Dogwood Rd

City: Great Neck | State: NY | Zip Code: 11024

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 12 / 28 / 2017

Transaction ID : 9469304

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 419.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Murray, Douglas, H, , MD

Mailing Address 4224 Valley Trail Dr

City: Atlanta | State: GA | Zip Code: 30339

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Peachtree Orthopedic Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 28 / Y Y Y Y 2017

Transaction ID : 9469439

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grimm, Bennett, Douglas, , MD

Mailing Address 61 Whitcher Street
Suite1100

City: Marietta | State: GA | Zip Code: 30060

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Resurgens Orthopaedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 29 / Y Y Y Y 2017

Transaction ID : 9472584

Amount of Each Receipt this Period: 500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Baker, Champ, , , III, MD

Mailing Address 806 Overlook Dr

City: Columbus | State: GA | Zip Code: 31906

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Jack Hughston Memorial Hospital
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 31 / Y Y Y Y 2017

Transaction ID : 9472590

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Allmacher, David, Harold, , MD

Mailing Address 504 W Mountain View

City: Missoula | State: MT | Zip Code: 59804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Missoula Bone & Joint
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 12 / 31 / 2017
Transaction ID : 9472592

Amount of Each Receipt this Period: 375.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bailey, James, R, , MD

Mailing Address 10439 Blue Summit Court

City: San Diego | State: CA | Zip Code: 92131

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt: 12 / 18 / 2017
Transaction ID : 9473922

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Jiranek, William, A, , MD

Mailing Address 4066 Old River Trail

City: Powhatan | State: VA | Zip Code: 23139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Duke University
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: 12 / 22 / 2017
Transaction ID : 9473923

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 543.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wasylik, Michael, A, , MD

Mailing Address 2919 Swann Ave Ste 201

City: Tampa | State: FL | Zip Code: 33609-4050

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 22 / Y Y Y Y 2017

Transaction ID : 9473925

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Besh, Basil, R, , MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): FORM Hand, Wrist & Elbow Institute
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9473926

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Newson, Graham, , ,

Mailing Address 317 Massachusetts Ave NE
1st Floor

City: Washington | State: DC | Zip Code: 20002-5769

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): American Academy of Orthopaedic Surg
Occupation (for Individual): Director, Office of Goverment Relation

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9473927

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1334.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cordell, Davin, , , MD

Mailing Address 325 Williamson Place

City: Corpus Christi | State: TX | Zip Code: 78411-1515

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Washington University Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 26 / Y Y Y Y 2017

Transaction ID : 9473929

Amount of Each Receipt this Period: 250.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Damalas, Dino, , ,

Mailing Address 9400 Higgins Rd

City: Rosemont | State: IL | Zip Code: 60018-4974

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): AAOS
Occupation (for Individual): Chief Operations Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 12 / D D 27 / Y Y Y Y 2017

Transaction ID : 9473930

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Prather, John, T, , MD

Mailing Address 301 W Broughton St #4A

City: Savannah | State: GA | Zip Code: 31401

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: M M 12 / D D 28 / Y Y Y Y 2017

Transaction ID : 9473931

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Iorio, Richard, , , MD

Mailing Address 1 Indian Hill Road

City: New Rochelle | State: NY | Zip Code: 10804

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): NYU Langone Medical Center
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 856.00

Date of Receipt: M M 12 / D D 28 / Y Y Y Y 2017

Transaction ID : 9473932

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mejia, Alfonso, , , MD, MPH

Mailing Address 5332 South Shore Drive

City: Chicago | State: IL | Zip Code: 60615

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Illinois Association of Orthopedic Sur
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt: M M 12 / D D 28 / Y Y Y Y 2017

Transaction ID : 9473933

Amount of Each Receipt this Period: 84.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nelson, Thomas, E, , MD

Mailing Address 6435 Virginia Drive

City: Excelsior | State: MN | Zip Code: 55331-7775

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopedic and Fracture Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 28 / Y Y Y Y 2017

Transaction ID : 9473934

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Nicholson, Christopher, W, , MD

Mailing Address 24 Little Comfort Rd

City: Savannah | State: GA | Zip Code: 31411

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Optim Orthopedics
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 29 / 2017
Transaction ID : 9474286

Amount of Each Receipt this Period: 100.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Khanuja, Harpal, Singh, , MD

Mailing Address 1 Ridge Farm Court

City: Cockeysville | State: MD | Zip Code: 21030

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): John Hopkins University, Department of
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 31 / 2017
Transaction ID : 9474428

Amount of Each Receipt this Period: 21.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Waddell, Bradford, Sutton, , MD

Mailing Address 235 North Regent St.

City: Port Chester | State: NY | Zip Code: 10573

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ochsner Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 31 / 2017
Transaction ID : 9474430

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 205.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lopez, David, Vincent, , MD

Mailing Address 27 Courtney Ct

City: Freehold | State: NJ | Zip Code: 07728

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Orthopaedic & Sports Medicine Speciali

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 12 / 31 / 2017

Transaction ID : 9474432

Amount of Each Receipt this Period: 84.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Newson, Graham, , ,

Mailing Address 317 Massachusetts Ave NE
1st Floor

City: Washington | State: DC | Zip Code: 20002-5769

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): American Academy of Orthopaedic Surg

Occupation (for Individual): Director, Office of Goverment Relation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 12 / 31 / 2017

Transaction ID : 9474433

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Diehl, Mark, W, , MD

Mailing Address 1110 Hazeltine Ln

City: Kennesaw | State: GA | Zip Code: 30152

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Pinnacle Orthopaedics

Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 31 / 2017

Transaction ID : 9474434

Amount of Each Receipt this Period: 100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Floyd, Mark, , , MD

Mailing Address 330 Turner McCall Blvd

City: Rome | State: GA | Zip Code: 30165

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Harbin Clinic, LLC
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: M M 12 / D D 31 / Y Y Y Y 2017

Transaction ID : 9474440

Amount of Each Receipt this Period: 10.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Floyd, Waldo, E, , III, MD

Mailing Address 3708 Northside Dr

City: Macon | State: GA | Zip Code: 31210

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Ortho Georgia
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 31 / Y Y Y Y 2017

Transaction ID : 9474441

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Busch, Michael, T, , MD

Mailing Address 5445 Meridian Mark Rd Ste 250

City: Atlanta | State: GA | Zip Code: 30342

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Childrens Orthopaedics of Atlanta
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 31 / Y Y Y Y 2017

Transaction ID : 9474446

Amount of Each Receipt this Period: 250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Schmitz, Michael, L, , MD

Mailing Address 1200 Lake Hearn Drive
Suite 400

City: Atlanta | State: GA | Zip Code: 30319

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Children's Orthopaedics of Atlanta
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 12 / D D 31 / Y Y Y Y 2017

Transaction ID : 9474451

Amount of Each Receipt this Period: 500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vena, Vincent, E, , MD

Mailing Address 528 Waterfall Drive

City: Johnstown | State: PA | Zip Code: 15906

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 12 / D D 22 / Y Y Y Y 2017

Transaction ID : 9475055

Amount of Each Receipt this Period: 250.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Cannon, David, L, , MD

Mailing Address 2639 Fox Hill Circle East

City: Germantown | State: TN | Zip Code: 38139

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): Campbell Clinic
Occupation (for Individual): Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 536.00

Date of Receipt: M M 12 / D D 29 / Y Y Y Y 2017

Transaction ID : 9475942

Amount of Each Receipt this Period: 84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 834.00

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name: Caldwell, Paul, E, , III, MD
Mailing Address: PO Box 71690
City: Richmond | State: VA | Zip Code: 23255
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Self Employed
Occupation (for Individual): Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00
Date of Receipt: M M 11 / D D 17 / Y Y Y Y 2017
Transaction ID : 9518444
Amount of Each Receipt this Period: 0.00
☒ Memo Item
Refund(s) on Schedule B Totaling $500.00 This changes the YTD Total to $0.00

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name: Richer, Ross, J, , MD
Mailing Address: 150 Hillspoint Rd
City: Westport | State: CT | Zip Code: 06880
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual): Orthopaedic Specialty Group
Occupation (for Individual): Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00
Date of Receipt: M M 11 / D D 27 / Y Y Y Y 2017
Transaction ID : 9518482
Amount of Each Receipt this Period: 0.00
☒ Memo Item
Refund(s) on Schedule B Totaling $500.00 This changes the YTD Total to $0.00

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name:
Mailing Address:
City: | State: | Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer (for Individual):
Occupation (for Individual):
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 340628.67

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)
☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Association of Orthopaedic Surgeons

Mailing Address 9400 W. Higgins

City: Rosemont | State: IL | Zip Code: 60018

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 17939.26

Date of Receipt: M M 07 / D D 28 / Y Y Y Y 2017

Transaction ID : 8769376

Amount of Each Receipt this Period: 1444.78

☐ Memo Item

Refund of bank fees from affiliated organization

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Association of Orthopaedic Surgeons

Mailing Address 9400 W. Higgins

City: Rosemont | State: IL | Zip Code: 60018

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 18844.24

Date of Receipt: M M 08 / D D 29 / Y Y Y Y 2017

Transaction ID : 8827428

Amount of Each Receipt this Period: 904.98

☐ Memo Item

Refund of bank fees from affiliated organization

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Association of Orthopaedic Surgeons

Mailing Address 9400 W. Higgins

City: Rosemont | State: IL | Zip Code: 60018

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 20124.86

Date of Receipt: M M 09 / D D 28 / Y Y Y Y 2017

Transaction ID : 8852432

Amount of Each Receipt this Period: 1280.62

☐ Memo Item

Refund of bank fees from affiliated organization

SUBTOTAL of Receipts This Page (optional) ▶ 3630.38

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Association of Orthopaedic Surgeons

Mailing Address 9400 W. Higgins

City: Rosemont | State: IL | Zip Code: 60018

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 21421.16

Date of Receipt: M M 10 / D D 25 / Y Y Y Y 2017

Transaction ID : 8908626

Amount of Each Receipt this Period: 1296.30

☐ Memo Item

Refund of bank fees from affiliated organization

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Association of Orthopaedic Surgeons

Mailing Address 9400 W. Higgins

City: Rosemont | State: IL | Zip Code: 60018

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 22621.18

Date of Receipt: M M 11 / D D 29 / Y Y Y Y 2017

Transaction ID : 8952249

Amount of Each Receipt this Period: 1200.02

☐ Memo Item

Refund of bank fees from affiliated organization

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
American Association of Orthopaedic Surgeons

Mailing Address 9400 W. Higgins

City: Rosemont | State: IL | Zip Code: 60018

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 23704.71

Date of Receipt: M M 12 / D D 22 / Y Y Y Y 2017

Transaction ID : 9472545

Amount of Each Receipt this Period: 1083.53

☐ Memo Item

Refund of bank fees from affiliated organization

SUBTOTAL of Receipts This Page (optional) ▶ 3579.85

TOTAL This Period (last page this line number only) ▶ 7210.23

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1368.85

Date of Receipt: M M 07 / D D 03 / Y Y Y Y 2017

Transaction ID : 8770948

Amount of Each Receipt this Period: 344.06

☐ Memo Item

Interest earned on bank account

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1368.93

Date of Receipt: M M 07 / D D 31 / Y Y Y Y 2017

Transaction ID : 8770949

Amount of Each Receipt this Period: 0.08

☐ Memo Item

Interest earned on bank account

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 1754.95

Date of Receipt: M M 08 / D D 31 / Y Y Y Y 2017

Transaction ID : 8827430

Amount of Each Receipt this Period: 0.09

☐ Memo Item

Interest earned on bank account

SUBTOTAL of Receipts This Page (optional) ▶ 344.23

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)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1754.86

Date of Receipt: M M 08 / D D 01 / Y Y Y Y 2017

Transaction ID : 8827431

Amount of Each Receipt this Period: 385.93

☐ Memo Item

Interest earned on bank account

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2149.14

Date of Receipt: M M 09 / D D 30 / Y Y Y Y 2017

Transaction ID : 8853637

Amount of Each Receipt this Period: 0.08

☐ Memo Item

Interest earned on bank account

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 2149.06

Date of Receipt: M M 09 / D D 01 / Y Y Y Y 2017

Transaction ID : 8853638

Amount of Each Receipt this Period: 394.11

☐ Memo Item

Interest earned on bank account

SUBTOTAL of Receipts This Page (optional) ▶ 780.12

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)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2570.88

Date of Receipt: M M 10 / D D 31 / Y Y Y Y 2017

Transaction ID : 8929940

Amount of Each Receipt this Period: 0.09

☐ Memo Item

Interest earned on bank account

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2570.79

Date of Receipt: M M 10 / D D 02 / Y Y Y Y 2017

Transaction ID : 8929941

Amount of Each Receipt this Period: 421.65

☐ Memo Item

Interest earned on bank account

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 2961.11

Date of Receipt: M M 11 / D D 30 / Y Y Y Y 2017

Transaction ID : 8956371

Amount of Each Receipt this Period: 0.08

☐ Memo Item

Interest earned on bank account

SUBTOTAL of Receipts This Page (optional) ▶ 421.82

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)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company
Mailing Address 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual)
Occupation (for Individual)
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 2961.03

Date of Receipt: M M 11 / D D 01 / Y Y Y Y 2017
Transaction ID : 8956372
Amount of Each Receipt this Period: 390.15
☐ Memo Item
Interest earned on bank account

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company
Mailing Address 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual)
Occupation (for Individual)
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 3347.38

Date of Receipt: M M 12 / D D 31 / Y Y Y Y 2017
Transaction ID : 9473226
Amount of Each Receipt this Period: 0.08
☐ Memo Item
Interest earned on bank account

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Northern Trust Company
Mailing Address 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual)
Occupation (for Individual)
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date ▼ 3347.30

Date of Receipt: M M 12 / D D 01 / Y Y Y Y 2017
Transaction ID : 9473229
Amount of Each Receipt this Period: 386.19
☐ Memo Item
Interest earned on bank account

SUBTOTAL of Receipts This Page (optional) ▶ 776.42

TOTAL This Period (last page this line number only) ▶ 2322.59

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8692317
Amount of Each Disbursement this Period: 137.98
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 05 / 2017
FEC Identification Number: C
Transaction ID : 8692322
Amount of Each Disbursement this Period: 428.81
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Department of the Treasury-Internal Revenue Service
Mailing Address: 1500 Pennsylvania Avenue, NW
City: Washington | State: DC | Zip Code: 20220
Purpose of Disbursement: Federal income tax on interest income
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 14 / 2017
FEC Identification Number: C
Transaction ID : 8734772
Amount of Each Disbursement this Period: 261.27
Federal income tax on interest income
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 828.06

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 18 / 2017
FEC Identification Number: C
Transaction ID : 8758111
Amount of Each Disbursement this Period: 153.12
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 11 / 2017
FEC Identification Number: C
Transaction ID : 8758115
Amount of Each Disbursement this Period: 190.53
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 06 / 2017
FEC Identification Number: C
Transaction ID : 8762477
Amount of Each Disbursement this Period: 304.14
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 647.79

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 25 / 2017
FEC Identification Number: C
Transaction ID : 8762562
Amount of Each Disbursement this Period: 152.35
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8770944
Amount of Each Disbursement this Period: 128.23
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8770945
Amount of Each Disbursement this Period: 111.63
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 392.21

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 04 / 2017
FEC Identification Number: C
Transaction ID : 8770946
Amount of Each Disbursement this Period: 43.95
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 31 / 2017
FEC Identification Number: C
Transaction ID : 8770947
Amount of Each Disbursement this Period: 89.30
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 08 / 2017
FEC Identification Number: C
Transaction ID : 8782131
Amount of Each Disbursement this Period: 132.72
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 265.97

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)
- [x] 21b
- [ ] 22
- [ ] 23
- [ ] 26
- [ ] 27
- [ ] 28a
- [ ] 28b
- [ ] 28c
- [ ] 29
- [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 15 / 2017
FEC Identification Number: C
Transaction ID : 8782132
Amount of Each Disbursement this Period: 143.46
Bank fees deducted from account
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 22 / 2017
FEC Identification Number: C
Transaction ID : 8823117
Amount of Each Disbursement this Period: 255.69
Bank fees deducted from account
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2017
FEC Identification Number: C
Transaction ID : 8823118
Amount of Each Disbursement this Period: 193.28
Bank fees deducted from account
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 592.43

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)
[x] 21b [ ] 22 [ ] 23 [ ] 26 [ ] 27
[ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 08 / 31 / 2017

FEC Identification Number: C

Transaction ID : 8825919

Amount of Each Disbursement this Period: 46.97

Bank fees deducted from account

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 09 / 06 / 2017

FEC Identification Number: C

Transaction ID : 8834354

Amount of Each Disbursement this Period: 234.72

Bank fees deducted from account

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 09 / 05 / 2017

FEC Identification Number: C

Transaction ID : 8834355

Amount of Each Disbursement this Period: 127.28

Bank fees deducted from account

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 408.97

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)
[x] 21b [ ] 22 [ ] 23 [ ] 26 [ ] 27
[ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 09 / 06 / 2017

FEC Identification Number: C

Transaction ID : 8834356

Amount of Each Disbursement this Period: 226.73

Bank fees deducted from account

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 09 / 12 / 2017

FEC Identification Number: C

Transaction ID : 8834357

Amount of Each Disbursement this Period: 73.40

Bank fees deducted from account

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 09 / 06 / 2017

FEC Identification Number: C

Transaction ID : 8834358

Amount of Each Disbursement this Period: 108.02

Bank fees deducted from account

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 408.15

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 11 / 2017
FEC Identification Number: C
Transaction ID : 8839047
Amount of Each Disbursement this Period: 1.38
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 19 / 2017
FEC Identification Number: C
Transaction ID : 8849621
Amount of Each Disbursement this Period: 95.21
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 26 / 2017
FEC Identification Number: C
Transaction ID : 8849622
Amount of Each Disbursement this Period: 173.63
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 270.22

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)
- [x] 21b
- [ ] 22
- [ ] 23
- [ ] 26
- [ ] 27
- [ ] 28a
- [ ] 28b
- [ ] 28c
- [ ] 29
- [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 29 / 2017
FEC Identification Number: C
Transaction ID : 8851063
Amount of Each Disbursement this Period: 199.49
Bank fees deducted from account
Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8856497
Amount of Each Disbursement this Period: 105.31
Bank fees deducted from account
Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8856498
Amount of Each Disbursement this Period: 165.38
Bank fees deducted from account
Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 470.18

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 03 / 2017

FEC Identification Number: C

Transaction ID : 8856499

Amount of Each Disbursement this Period: 243.55

Bank fees deducted from account

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 04 / 2017

FEC Identification Number: C

Transaction ID : 8856500

Amount of Each Disbursement this Period: 97.28

Bank fees deducted from account

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Department of the Treasury-Internal Revenue Service

Mailing Address 1500 Pennsylvania Avenue, NW

City: Washington | State: DC | Zip Code: 20220

Purpose of Disbursement: Federal income tax on interest income

Candidate Name

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 13 / 2017

FEC Identification Number: C

Transaction ID : 8898455

Amount of Each Disbursement this Period: 393.52

Federal income tax on interest income

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 734.35

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2017
FEC Identification Number: C
Transaction ID : 8898456
Amount of Each Disbursement this Period: 101.75
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 17 / 2017
FEC Identification Number: C
Transaction ID : 8900322
Amount of Each Disbursement this Period: 48.80
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 24 / 2017
FEC Identification Number: C
Transaction ID : 8907082
Amount of Each Disbursement this Period: 268.86
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 419.41

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)
[x] 21b [ ] 22 [ ] 23 [ ] 26 [ ] 27
[ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : 8907083

Amount of Each Disbursement this Period: 23.38

Bank fees deducted from account

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2017

FEC Identification Number: C

Transaction ID : 8907084

Amount of Each Disbursement this Period: 35.35

Bank fees deducted from account

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 23 / 2017

FEC Identification Number: C

Transaction ID : 8907085

Amount of Each Disbursement this Period: 6.46

Bank fees deducted from account

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 65.19

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 23 / 2017
FEC Identification Number: C
Transaction ID : 8907086
Amount of Each Disbursement this Period: 0.69
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C
Transaction ID : 8927077
Amount of Each Disbursement this Period: 129.39
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8929938
Amount of Each Disbursement this Period: 262.38
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 392.46

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 03 / 2017
FEC Identification Number: C
Transaction ID : 8929939
Amount of Each Disbursement this Period: 94.20
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 06 / 2017
FEC Identification Number: C
Transaction ID : 8929942
Amount of Each Disbursement this Period: 116.47
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 07 / 2017
FEC Identification Number: C
Transaction ID : 8934432
Amount of Each Disbursement this Period: 154.39
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 365.06

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)
- [x] 21b
- [ ] 22
- [ ] 23
- [ ] 26
- [ ] 27
- [ ] 28a
- [ ] 28b
- [ ] 28c
- [ ] 29
- [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C
Transaction ID : 8946351
Amount of Each Disbursement this Period: 243.63
Bank fees deducted from account
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 21 / 2017
FEC Identification Number: C
Transaction ID : 8948919
Amount of Each Disbursement this Period: 199.56
Bank fees deducted from account
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 28 / 2017
FEC Identification Number: C
Transaction ID : 8951403
Amount of Each Disbursement this Period: 193.42
Bank fees deducted from account
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 636.61

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)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 04 / 2017
FEC Identification Number: C
Transaction ID : 8956370
Amount of Each Disbursement this Period: 113.53
Bank fees deducted from account
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 05 / 2017
FEC Identification Number: C
Transaction ID : 8956373
Amount of Each Disbursement this Period: 243.42
Bank fees deducted from account
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Category/Type: 001
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 04 / 2017
FEC Identification Number: C
Transaction ID : 8956374
Amount of Each Disbursement this Period: 73.25
Bank fees deducted from account
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 430.20

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)
- [x] 21b
- [ ] 22
- [ ] 23
- [ ] 26
- [ ] 27
- [ ] 28a
- [ ] 28b
- [ ] 28c
- [ ] 29
- [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2017
FEC Identification Number: C
Transaction ID : 9460528
Amount of Each Disbursement this Period: 81.98
Bank fees deducted from account
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 05 / 2017
FEC Identification Number: C
Transaction ID : 9460529
Amount of Each Disbursement this Period: 213.10
Bank fees deducted from account
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fees deducted from account
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 19 / 2017
FEC Identification Number: C
Transaction ID : 9461039
Amount of Each Disbursement this Period: 164.83
Bank fees deducted from account
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 459.91

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)
[x] 21b [ ] 22 [ ] 23 [ ] 26 [ ] 27
[ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 27 / 2017

FEC Identification Number: C

Transaction ID : 9472543

Amount of Each Disbursement this Period: 209.76

Bank fees deducted from account

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 29 / 2017

FEC Identification Number: C

Transaction ID : 9472544

Amount of Each Disbursement this Period: 113.72

Bank fees deducted from account

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fee deducted from account

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 22 / 2017

FEC Identification Number: C

Transaction ID : 9473227

Amount of Each Disbursement this Period: 30.00

Bank fee deducted from account

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 353.48

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)
- [x] 21b
- [ ] 22
- [ ] 23
- [ ] 26
- [ ] 27
- [ ] 28a
- [ ] 28b
- [ ] 28c
- [ ] 29
- [ ] 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Northern Trust Company
Mailing Address: 50 S La Salle St
City: Chicago | State: IL | Zip Code: 60603
Purpose of Disbursement: Bank fee deducted from account
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C
Transaction ID : 9473228
Amount of Each Disbursement this Period: 30.00
Bank fee deducted from account
[ ] Memo Item

B.
Full Name (Last, First, Middle Initial):
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: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
[ ] Memo Item

C.
Full Name (Last, First, Middle Initial):
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: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 30.00

TOTAL This Period (last page this line number only) ▶ 8170.65

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Andy Harris For Congress
Mailing Address: PO Box 426
City: Stevensville | State: MD | Zip Code: 21666
Purpose of Disbursement:
Candidate Name: Harris, Andrew, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00435974
Transaction ID : 8734520
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Dr. Brian Babin For Congress
Mailing Address: PO Box 159
City: Woodville | State: TX | Zip Code: 75979
Purpose of Disbursement:
Candidate Name: Babin, Brian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 36
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00553859
Transaction ID : 8734521
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Buddy Carter For Congress
Mailing Address: PO Box 10570
City: Savannah | State: GA | Zip Code: 31412
Purpose of Disbursement:
Candidate Name: Carter, Earl, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00543967
Transaction ID : 8734522
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Wenstrup For Congress
Mailing Address: PO Box 9551
City: Cincinnati | State: OH | Zip Code: 45209
Purpose of Disbursement:
Candidate Name: Wenstrup, Brad, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00497818
Transaction ID : 8734523
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Bill Flores For Congress
Mailing Address: PO Box 6207
City: Bryan | State: TX | Zip Code: 77805
Purpose of Disbursement:
Candidate Name: Flores, Bill, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 17
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00472241
Transaction ID : 8734524
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Paul Tonko For Congress
Mailing Address: 911 Central Avenue # 221
City: Albany | State: NY | Zip Code: 12206
Purpose of Disbursement:
Candidate Name: Tonko, Paul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00450049
Transaction ID : 8734525
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): People For Derek Kilmer
Mailing Address: PO Box 1381
City: Tacoma | State: WA | Zip Code: 98402
Purpose of Disbursement:
Candidate Name: Kilmer, Derek, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M 07 / D D 12 / Y Y Y Y 2017
FEC Identification Number: C C00514893
Transaction ID : 8734526
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Nutmeg PAC
Mailing Address: 777 Summer St, Suite 302
City: Stamford | State: CT | Zip Code: 06901
Purpose of Disbursement: Blumenthal's LPAC
Candidate Name: Nutmeg PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 07 / D D 12 / Y Y Y Y 2017
FEC Identification Number: C C00492983
Transaction ID : 8734527
Amount of Each Disbursement this Period: 5000.00
Blumenthal's LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Citizens For Rush
Mailing Address: P. O. Box 7292
City: Chicago | State: IL | Zip Code: 60680
Purpose of Disbursement:
Candidate Name: Rush, Bobby, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: M M 07 / D D 12 / Y Y Y Y 2017
FEC Identification Number: C C00257121
Transaction ID : 8734528
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

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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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Kurt Schrader For Congress
Mailing Address: PO Box 3314
City: Oregon City | State: OR | Zip Code: 97045
Purpose of Disbursement:
Candidate Name: Schrader, Kurt, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OR District: 05
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00446906
Transaction ID : 8734533
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Moulton For Congress
Mailing Address: PO Box 2013
City: Salem | State: MA | Zip Code: 01970
Purpose of Disbursement:
Candidate Name: Moulton, Seth, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00547240
Transaction ID : 8734535
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Loudermilk For Congress
Mailing Address: PO Box 447
City: Cassville | State: GA | Zip Code: 30123
Purpose of Disbursement:
Candidate Name: Loudermilk, Barry, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 11
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00543892
Transaction ID : 8734536
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): McHenry For Congress
Mailing Address: PO Box 2165
City: Gastonia | State: NC | Zip Code: 28053
Purpose of Disbursement:
Candidate Name: McHenry, Patrick, Timothy, Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 10
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00393629
Transaction ID : 8734537
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Paul Tonko For Congress
Mailing Address: 911 Central Avenue # 221
City: Albany | State: NY | Zip Code: 12206
Purpose of Disbursement:
Candidate Name: Tonko, Paul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00450049
Transaction ID : 8734548
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Paul Tonko For Congress
Mailing Address: 911 Central Avenue # 221
City: Albany | State: NY | Zip Code: 12206
Purpose of Disbursement: Void - Paul Tonko for Congress
Candidate Name: Tonko, Paul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 12 / 2017
FEC Identification Number: C C00450049
Transaction ID : 8734560
Amount of Each Disbursement this Period: – 2500.00
Void - Paul Tonko for Congress
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Strange For Senate
Mailing Address: PO Box 3670
City: Montgomery | State: AL | Zip Code: 36109
Purpose of Disbursement:
Candidate Name: Strange, Luther, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: AL District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 13 / 2017
FEC Identification Number: C C00629451
Transaction ID : 8734771
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kay Granger Campaign Fund
Mailing Address: 1701 River Run Ste 308
City: Fort Worth | State: TX | Zip Code: 76107
Purpose of Disbursement:
Candidate Name: Granger, Kay, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 12
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 13 / 2017
FEC Identification Number: C C00310532
Transaction ID : 8734774
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Adrian Smith For Congress
Mailing Address: 3321 Avenue I Suite 6
City: Scottsbluff | State: NE | Zip Code: 69361
Purpose of Disbursement:
Candidate Name: Smith, Adrian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NE District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2017
FEC Identification Number: C C00412890
Transaction ID : 8757783
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Building America's Republican Representation (BARR PAC)
Mailing Address: 402 S. Capitol St, SE
City: Washington | State: DC | Zip Code: 20002
Purpose of Disbursement: Andy Barr's LPAC
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 07 / D D 19 / Y Y Y Y 2017
FEC Identification Number: C
Transaction ID : 8757784
Amount of Each Disbursement this Period: 2500.00
Andy Barr's LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Graves For Congress
Mailing Address: PO Box 335
City: Calhoun | State: GA | Zip Code: 30703
Purpose of Disbursement:
Candidate Name: Graves, Tom, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 14
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 07 / D D 19 / Y Y Y Y 2017
FEC Identification Number: C C00462556
Transaction ID : 8757786
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Friends Of David Schweikert
Mailing Address: 228 S Washington Street Ste 115
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement:
Candidate Name: Schweikert, David, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 07 / D D 19 / Y Y Y Y 2017
FEC Identification Number: C C00540617
Transaction ID : 8757790
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Wenstrup For Congress
Mailing Address: PO Box 9551
City: Cincinnati | State: OH | Zip Code: 45209
Purpose of Disbursement:
Candidate Name: Wenstrup, Brad, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2017
FEC Identification Number: C C00497818
Transaction ID : 8757800
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): David Scott For Congress
Mailing Address: P.O. Box 960821
City: Riverdale | State: GA | Zip Code: 30296
Purpose of Disbursement:
Candidate Name: Scott, David, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 13
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2017
FEC Identification Number: C C00369801
Transaction ID : 8757808
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Elise For Congress
Mailing Address: PO Box 500
City: Glens Falls | State: NY | Zip Code: 12801
Purpose of Disbursement:
Candidate Name: Stefanik, Elise, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2017
FEC Identification Number: C C00547893
Transaction ID : 8757809
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Strange For Senate
Mailing Address: PO Box 3670
City: Montgomery | State: AL | Zip Code: 36109
Purpose of Disbursement:
Candidate Name: Strange, Luther, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: AL District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00629451
Transaction ID : 8766649
Amount of Each Disbursement this Period: 3000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Ryan Costello For Congress
Mailing Address: PO Box 3154
City: West Chester | State: PA | Zip Code: 19381
Purpose of Disbursement:
Candidate Name: Costello, Ryan, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00554899
Transaction ID : 8766650
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Ryan Costello For Congress
Mailing Address: PO Box 3154
City: West Chester | State: PA | Zip Code: 19381
Purpose of Disbursement:
Candidate Name: Costello, Ryan, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 06
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00554899
Transaction ID : 8766651
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Brian Fitzpatrick For Congress
Mailing Address: PO Box 939
City: Langhorne | State: PA | Zip Code: 19047
Purpose of Disbursement:
Candidate Name: Fitzpatrick, Brian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00607416
Transaction ID : 8766652
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Chesapeake PAC
Mailing Address: 170 Old Enterprise Rd
P.O. Box 5323
City: Upper Marlboro | State: MD | Zip Code: 20774
Purpose of Disbursement: Harris' LPAC
Candidate Name: Chesapeake PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00338756
Transaction ID : 8766653
Amount of Each Disbursement this Period: 5000.00
Harris' LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Drew Ferguson For Congress Inc.
Mailing Address: PO Box 387
City: West Point | State: GA | Zip Code: 31833
Purpose of Disbursement:
Candidate Name: Ferguson, Anderson, , , IV
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00607838
Transaction ID : 8766654
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Gene Green Congressional Campaign
Mailing Address: PO Box 16128
City: Houston | State: TX | Zip Code: 77222
Purpose of Disbursement:
Candidate Name: Green, Gene, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 29
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00254185
Transaction ID : 8766655
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Rick W. Allen For Congress
Mailing Address: P. O. Box 338
City: Augusta | State: GA | Zip Code: 30903
Purpose of Disbursement:
Candidate Name: Allen, Richard, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 12
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00504019
Transaction ID : 8766656
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Committee To Re-Elect Linda Sanchez
Mailing Address: 410 1st St Se Suite 310
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Sanchez, Linda, T., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 38
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00384057
Transaction ID : 8766665
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Lance For Congress
Mailing Address: PO Box 999
City: Edison | State: NJ | Zip Code: 08818
Purpose of Disbursement:
Candidate Name: Lance, Leonard, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00444224
Transaction ID : 8766666
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Rely On Your Beliefs Fund
Mailing Address: Attn: Keri Ann Hayes, 209 Pennsylvania Avenue, SE
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Blunt's LPAC
Candidate Name: Rely On Your Beliefs Fund
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00344648
Transaction ID : 8766667
Amount of Each Disbursement this Period: 1500.00
Blunt's LPAC
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): The Eye of the Tiger PAC
Mailing Address: P.O. Box 2485
City: Springfield | State: VA | Zip Code: 22152
Purpose of Disbursement: Scalise's LPAC
Candidate Name: The Eye of the Tiger PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00467431
Transaction ID : 8766668
Amount of Each Disbursement this Period: 1000.00
Scalise's LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Buddy Carter For Congress
Mailing Address: PO Box 10570
City: Savannah | State: GA | Zip Code: 31412
Purpose of Disbursement:
Candidate Name: Carter, Earl, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00543967
Transaction ID : 8766669
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Mullin For Congress
Mailing Address: PO Box 3681
City: Muskogee | State: OK | Zip Code: 74402
Purpose of Disbursement:
Candidate Name: Mullin, Markwayne, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OK District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00498345
Transaction ID : 8766670
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Larson For Congress
Mailing Address: PO Box 261172
City: Hartford | State: CT | Zip Code: 06126
Purpose of Disbursement:
Candidate Name: Larson, John, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00330142
Transaction ID : 8766671
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Charlie Crist For Congress
Mailing Address: PO Box 1547
City: St. Petersburg | State: FL | Zip Code: 33731
Purpose of Disbursement:
Candidate Name: Crist, Charles, Joseph, Rep., Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 13
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00590067
Transaction ID : 8766672
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Morgan Griffith For Congress
Mailing Address: PO Box 361
City: Christiansburg | State: VA | Zip Code: 24068
Purpose of Disbursement:
Candidate Name: Griffith, H Morgan, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2017
FEC Identification Number: C C00477240
Transaction ID : 8766673
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Daniel Webster For Congress
Mailing Address: P. O. Box 1007
City: Webster | State: FL | Zip Code: 33597
Purpose of Disbursement:
Candidate Name: Webster, Daniel, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 07 / 2017
FEC Identification Number: C C00481911
Transaction ID : 8773824
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Making Business Excel PAC
Mailing Address: P.O. Box 3241
City: Cheyenne | State: WY | Zip Code: 82003
Purpose of Disbursement: Enzi's LPAC
Candidate Name: Making Business Excel PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 07 / 2017
FEC Identification Number: C C00392134
Transaction ID : 8773826
Amount of Each Disbursement this Period: 1000.00
Enzi's LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Handel For Congress, Inc.
Mailing Address: 4010 Old Milton Pkwy
City: Alpharetta | State: GA | Zip Code: 30005
Purpose of Disbursement:
Candidate Name: Handel, Karen, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 07 / 2017
FEC Identification Number: C C00633362
Transaction ID : 8773827
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Collins For Congress
Mailing Address: PO Box 386
City: Clarence | State: NY | Zip Code: 14031
Purpose of Disbursement:
Candidate Name: Collins, Christopher, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 27
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 07 / 2017
FEC Identification Number: C C00520379
Transaction ID : 8773828
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Ann Wagner For Congress
Mailing Address: PO Box 50
City: Ballwin | State: MO | Zip Code: 63022
Purpose of Disbursement:
Candidate Name: Wagner, Ann, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 07 / 2017
FEC Identification Number: C C00495846
Transaction ID : 8773829
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Frelinghuysen For Congress
Mailing Address: 19 Cattano Avenue
City: Morristown | State: NJ | Zip Code: 07960
Purpose of Disbursement: Void - Frelinghuysen for Congress
Candidate Name: Frelinghuysen, Rodney, P., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 11
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 15 / 2017
FEC Identification Number: C C00299404
Transaction ID : 8782136
Amount of Each Disbursement this Period: – 1000.00
Void - Frelinghuysen for Congress
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pete Sessions For Congress
Mailing Address: PO Box 823047
City: Dallas | State: TX | Zip Code: 75382
Purpose of Disbursement:
Candidate Name: Sessions, Pete, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 32
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2017
FEC Identification Number: C C00303305
Transaction ID : 8819688
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Bill Flores For Congress
Mailing Address: PO Box 6207
City: Bryan | State: TX | Zip Code: 77805
Purpose of Disbursement:
Candidate Name: Flores, Bill, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 17
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2017
FEC Identification Number: C C00472241
Transaction ID : 8819689
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Hudson For Congress
Mailing Address: PO Box 5053
City: Concord | State: NC | Zip Code: 28027
Purpose of Disbursement:
Candidate Name: Hudson, Richard, L., Rep., Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2017
FEC Identification Number: C C00504522
Transaction ID : 8819690
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Hudson For Congress
Mailing Address: PO Box 5053
City: Concord | State: NC | Zip Code: 28027
Purpose of Disbursement:
Candidate Name: Hudson, Richard, L., Rep., Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 08
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2017
FEC Identification Number: C C00504522
Transaction ID : 8819691
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Brian Fitzpatrick For Congress
Mailing Address: PO Box 939
City: Langhorne | State: PA | Zip Code: 19047
Purpose of Disbursement:
Candidate Name: Fitzpatrick, Brian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 07 / 2017
FEC Identification Number: C C00607416
Transaction ID : 8830989
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Strange For Senate
Mailing Address: PO Box 3670
City: Montgomery | State: AL | Zip Code: 36109
Purpose of Disbursement:
Candidate Name: Strange, Luther, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: AL District:
Disbursement For: 2017 ☐ Primary ☐ General ☒ Other (specify) 2017 Debt Retirement
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00629451
Transaction ID : 8839165
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Strange For Senate
Mailing Address: PO Box 3670
City: Montgomery | State: AL | Zip Code: 36109
Purpose of Disbursement:
Candidate Name: Strange, Luther, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: AL District:
Disbursement For: 2017 ☐ Primary ☐ General ☒ Other (specify) 2017 Debt Retirement
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00629451
Transaction ID : 8839166
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Friends Of Jim Clyburn
Mailing Address: Post Office Box 12567
City: Columbia | State: SC | Zip Code: 29211
Purpose of Disbursement:
Candidate Name: Clyburn, James, E., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: SC District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00255562
Transaction ID : 8839167
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Friends Of Cheri Bustos
Mailing Address: 1050 17th St Nw Ste 590
City: Washington | State: DC | Zip Code: 20036
Purpose of Disbursement:
Candidate Name: Bustos, Cheri, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 17
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00498568
Transaction ID : 8839168
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Wells PAC
Mailing Address: 2470 Daniels Bridge Rd Suite 121
City: Athens | State: GA | Zip Code: 30606
Purpose of Disbursement: Austin Scott Leadership PAC
Candidate Name: Wells PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00500793
Transaction ID : 8839173
Amount of Each Disbursement this Period: 3500.00
Austin Scott Leadership PAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Friends Of Raja For Congress
Mailing Address: PO Box 681202
City: Schaumburg | State: IL | Zip Code: 60168
Purpose of Disbursement:
Candidate Name: Krishnamoorthi, Raja, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00575092
Transaction ID : 8839174
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Team McHenry
Mailing Address: 228 S Washington Street Suite 115
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement: McHenry JFC
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C
Transaction ID : 8839175
Amount of Each Disbursement this Period: 1000.00
McHenry JFC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Austin Scott For Congress Inc
Mailing Address: PO Box 2530
City: Tifton | State: GA | Zip Code: 31793
Purpose of Disbursement:
Candidate Name: Scott, James, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00482737
Transaction ID : 8839177
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Suozzi For Congress
Mailing Address: PO Box 669
City: Glen Cove | State: NY | Zip Code: 11542
Purpose of Disbursement:
Candidate Name: Suozzi, Thomas, R., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00607200
Transaction ID : 8839178
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Mike Bishop For Congress
Mailing Address: PO Box 1148
City: Brighton | State: MI | Zip Code: 48116
Purpose of Disbursement:
Candidate Name: Bishop, Mike, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 08
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00561001
Transaction ID : 8839180
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Walberg For Congress
Mailing Address: PO Box 1362
City: Jackson | State: MI | Zip Code: 49204
Purpose of Disbursement:
Candidate Name: Walberg, Timothy, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00390724
Transaction ID : 8839181
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Lou Correa For Congress
Mailing Address: P.O. Box 2229
City: San Marcos | State: CA | Zip Code: 92079
Purpose of Disbursement:
Candidate Name: Lou Correa For Congress
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 46
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00578302
Transaction ID : 8839182
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Yoder For Congress, Inc
Mailing Address: PO Box 26742
City: Overland Park | State: KS | Zip Code: 66225
Purpose of Disbursement:
Candidate Name: Yoder, Kevin, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00472365
Transaction ID : 8839183
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Katko For Congress
Mailing Address: 228 S Washington St Ste 115
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement:
Candidate Name: Katko, John, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 24
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00556365
Transaction ID : 8839184
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Gregg Harper For Congress
Mailing Address: Post Office Box 54344
City: Pearl | State: MS | Zip Code: 39288
Purpose of Disbursement:
Candidate Name: Harper, Gregg, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MS District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00441295
Transaction ID : 8839185
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Excelsior PAC
Mailing Address: 2470 Daniells Br Rd, Suite 121
City: Athens | State: GA | Zip Code: 30606
Purpose of Disbursement: Reed's LPAC
Candidate Name: Excelsior PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00541078
Transaction ID : 8839186
Amount of Each Disbursement this Period: 1000.00
Reed's LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Tom Reed For Congress
Mailing Address: PO Box 10847
City: Rochester | State: NY | Zip Code: 14610
Purpose of Disbursement:
Candidate Name: Reed, Thomas, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 29
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00464032
Transaction ID : 8839187
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Walters For Congress
Mailing Address: 9070 Irvine Center Drive, #150
City: Irvine | State: CA | Zip Code: 92618
Purpose of Disbursement:
Candidate Name: Walters, Mimi, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 45
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00546853
Transaction ID : 8839188
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Andy Harris For Congress
Mailing Address: PO Box 426
City: Stevensville | State: MD | Zip Code: 21666
Purpose of Disbursement:
Candidate Name: Harris, Andrew, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00435974
Transaction ID : 8839189
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Andy Harris For Congress
Mailing Address: PO Box 426
City: Stevensville | State: MD | Zip Code: 21666
Purpose of Disbursement:
Candidate Name: Harris, Andrew, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 01
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00435974
Transaction ID : 8839190
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Citizens For Rush
Mailing Address: P. O. Box 7292
City: Chicago | State: IL | Zip Code: 60680
Purpose of Disbursement:
Candidate Name: Rush, Bobby, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00257121
Transaction ID : 8839191
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Katherine Clark For Congress
Mailing Address: PO Box 159
City: Belmont | State: MA | Zip Code: 02478
Purpose of Disbursement:
Candidate Name: Clark, Katherine, M, Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MA District: 05
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00541888
Transaction ID : 8839192
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Dr. Raul Ruiz For Congress
Mailing Address: PO Box 3433
City: Palm Desert | State: CA | Zip Code: 92261
Purpose of Disbursement:
Candidate Name: Ruiz, Raul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 36
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00502575
Transaction ID : 8839193
Amount of Each Disbursement this Period: 1650.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3650.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Doing Right - Results, Action, Unity, Leadership PAC

Mailing Address P.O. Box 3433

City: Palm Desert | State: CA | Zip Code: 92261

Purpose of Disbursement: Ruiz LPAC

Candidate Name: Doing Right - Results, Action, Unity, Leadership PAC

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 09 / 14 / 2017

FEC Identification Number: C C00569871

Transaction ID : 8839194

Amount of Each Disbursement this Period: 2500.00

Ruiz LPAC

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Emmer For Congress

Mailing Address PO Box 998

City: Anoka | State: MN | Zip Code: 55303

Purpose of Disbursement:

Candidate Name: Emmer, Tom, Earl, Rep., Jr.

Category/Type: 011

Office Sought: ☒ House ☐ Senate ☐ President
State: MN District: 06

Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 09 / 14 / 2017

FEC Identification Number: C C00545749

Transaction ID : 8839195

Amount of Each Disbursement this Period: 1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Kind For Congress Committee

Mailing Address 205 5th Avenue S
Room 411

City: La Crosse | State: WI | Zip Code: 54601

Purpose of Disbursement:

Candidate Name: Kind, Ronald, , ,

Category/Type: 011

Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 03

Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 09 / 14 / 2017

FEC Identification Number: C C00312017

Transaction ID : 8839196

Amount of Each Disbursement this Period: 1000.00

☐ Memo Item

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)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Kustoff For Congress
Mailing Address: 1661 Aaron Brenner Dr, Ste 300
City: Memphis | State: TN | Zip Code: 38120
Purpose of Disbursement:
Candidate Name: Kustoff, David, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00614826
Transaction ID : 8839197
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Simpson For Congress
Mailing Address: 1487 Parkway Drive
City: Blackfoot | State: ID | Zip Code: 83221
Purpose of Disbursement:
Candidate Name: Simpson, Michael, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: ID District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00331397
Transaction ID : 8839198
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Meadows For Congress
Mailing Address: PO Box 811
City: Hendersonville | State: NC | Zip Code: 28793
Purpose of Disbursement:
Candidate Name: Meadows, Mark, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 11
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00503094
Transaction ID : 8839202
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Pascrell For Congress
Mailing Address: Pob 100
City: Teaneck | State: NJ | Zip Code: 07666
Purpose of Disbursement:
Candidate Name: Pascrell, William, , , Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 14 / 2017
FEC Identification Number: C C00313510
Transaction ID : 8839211
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Cramer For Congress
Mailing Address: PO Box 396
City: Bismarck | State: ND | Zip Code: 58502
Purpose of Disbursement:
Candidate Name: Cramer, Kevin, J., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: ND District: 00
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00504704
Transaction ID : 8849527
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Drew Ferguson For Congress Inc.
Mailing Address: PO Box 387
City: West Point | State: GA | Zip Code: 31833
Purpose of Disbursement:
Candidate Name: Ferguson, Anderson, , , IV
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00607838
Transaction ID : 8849528
Amount of Each Disbursement this Period: 4000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Sanford Bishop For Congress
Mailing Address: P O Box 909
City: Columbus | State: GA | Zip Code: 31902
Purpose of Disbursement:
Candidate Name: Bishop, Sanford, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 02
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00266940
Transaction ID : 8849533
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Duncan D. Hunter For Congress
Mailing Address: PO Box 1545
City: El Cajon | State: CA | Zip Code: 92022
Purpose of Disbursement:
Candidate Name: Hunter, Duncan, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 50
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00433524
Transaction ID : 8849534
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Garret Graves For Congress
Mailing Address: PO Box 64845
City: Baton Rouge | State: LA | Zip Code: 70896
Purpose of Disbursement:
Candidate Name: Graves, Garret, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: LA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00558486
Transaction ID : 8849535
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Graves For Congress
Mailing Address: PO Box 335
City: Calhoun | State: GA | Zip Code: 30703
Purpose of Disbursement:
Candidate Name: Graves, Tom, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 14
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00462556
Transaction ID : 8849536
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Handel For Congress, Inc.
Mailing Address: 4010 Old Milton Pkwy
City: Alpharetta | State: GA | Zip Code: 30005
Purpose of Disbursement:
Candidate Name: Handel, Karen, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00633362
Transaction ID : 8849537
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): David Rouzer For Congress
Mailing Address: PO Box 3142
City: Wilmington | State: NC | Zip Code: 28406
Purpose of Disbursement:
Candidate Name: Rouzer, David, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00501643
Transaction ID : 8849538
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Rob Wittman For Congress
Mailing Address: PO Box 3770
City: Oakton | State: VA | Zip Code: 22124
Purpose of Disbursement:
Candidate Name: Wittman, Robert, J., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00441014
Transaction ID : 8849539
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Loudermilk For Congress
Mailing Address: PO Box 447
City: Cassville | State: GA | Zip Code: 30123
Purpose of Disbursement:
Candidate Name: Loudermilk, Barry, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 11
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00543892
Transaction ID : 8849540
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Dr. Brian Babin For Congress
Mailing Address: PO Box 159
City: Woodville | State: TX | Zip Code: 75979
Purpose of Disbursement:
Candidate Name: Babin, Brian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 36
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00553859
Transaction ID : 8849541
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Kansans For Marshall
Mailing Address: PO Box 1588
City: Great Bend | State: KS | Zip Code: 67530
Purpose of Disbursement:
Candidate Name: Marshall, Roger, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00576173
Transaction ID : 8849542
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kansans For Marshall
Mailing Address: PO Box 1588
City: Great Bend | State: KS | Zip Code: 67530
Purpose of Disbursement:
Candidate Name: Marshall, Roger, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 01
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00576173
Transaction ID : 8849543
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Kaine For Virginia
Mailing Address: 1751 Potomac Greens Drive
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement:
Candidate Name: Kaine, Tim, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: VA District:
Disbursement For: 2020 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00495358
Transaction ID : 8849544
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Collins For Congress
Mailing Address: PO Box 386
City: Clarence | State: NY | Zip Code: 14031
Purpose of Disbursement:
Candidate Name: Collins, Christopher, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 27
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00520379
Transaction ID : 8849545
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Davis For Congress/Friends Of Davis
Mailing Address: 5956 W. Race Avenue
City: Chicago | State: IL | Zip Code: 60644
Purpose of Disbursement:
Candidate Name: Davis, Danny, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00172619
Transaction ID : 8849546
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Doggett For Congress
Mailing Address: PO Box 5843
City: Austin | State: TX | Zip Code: 78763
Purpose of Disbursement:
Candidate Name: Doggett, Lloyd, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 10
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00286500
Transaction ID : 8849547
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Blumenauer For Congress
Mailing Address: 901 Se Oak Street, Suite 105
City: Portland | State: OR | Zip Code: 97214
Purpose of Disbursement:
Candidate Name: Blumenauer, Earl, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OR District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00307314
Transaction ID : 8849548
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Committee To Re-Elect Linda Sanchez
Mailing Address: 410 1st St Se, Suite 310
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Sanchez, Linda, T., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 38
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00384057
Transaction ID : 8849549
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Richard E Neal For Congress Committee
Mailing Address: 76 Magnolia Terrace
City: Springfield | State: MA | Zip Code: 01108
Purpose of Disbursement:
Candidate Name: Neal, Richard, E., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00226522
Transaction ID : 8849550
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Conservative Roundtable
Mailing Address: PO Box 97275
City: Raleigh State: NC Zip Code: 27624
Purpose of Disbursement: Holding LPAC
Category/Type: 011
Candidate Name: Conservative Roundtable
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00549725
Transaction ID : 8849551
Amount of Each Disbursement this Period: 3500.00
Holding LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Blum For Congress
Mailing Address: 2728 Asbury Road Suite 400
City: Dubuque State: IA Zip Code: 52001
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Blum, Rodney, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: IA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00543926
Transaction ID : 8849552
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Scott Peters For Congress
Mailing Address: PO Box 22074
City: San Diego State: CA Zip Code: 92192
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Peters, Scott, Harvey, Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 52
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00503110
Transaction ID : 8849553
Amount of Each Disbursement this Period: 3650.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 9650.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Martin Heinrich For Senate
Mailing Address: P.O. Box 25763
City: Albuquerque | State: NM | Zip Code: 87125
Purpose of Disbursement:
Candidate Name: Heinrich, Martin, T., Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: NM District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00434563
Transaction ID : 8849554
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): A New Direction PAC
Mailing Address: 105 N State Street
City: Concord | State: NH | Zip Code: 03301
Purpose of Disbursement: Shaheen LPAC
Candidate Name: A New Direction PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00458570
Transaction ID : 8849555
Amount of Each Disbursement this Period: 5000.00
Shaheen LPAC
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): BackPAC
Mailing Address: 1751 Potomac Greens Drive
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement: Beyer LPAC
Candidate Name: BackPAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00566562
Transaction ID : 8849556
Amount of Each Disbursement this Period: 2500.00
Beyer LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Bilirakis For Congress
Mailing Address: PO Box 606
City: Tarpon Springs | State: FL | Zip Code: 34688
Purpose of Disbursement:
Candidate Name: Bilirakis, Gus, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00408534
Transaction ID : 8849559
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Stabenow For Us Senate
Mailing Address: P.O. Box 4945
City: East Lansing | State: MI | Zip Code: 48826
Purpose of Disbursement:
Candidate Name: Stabenow, Debbie, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: MI District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00344473
Transaction ID : 8849560
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Team Ryan
Mailing Address: 320 First St SE
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Ryan Leadership PAC
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C
Transaction ID : 8849561
Amount of Each Disbursement this Period: 2500.00
Ryan Leadership PAC
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Clarke For Congress
Mailing Address: 111-36 200th. Street
City: Hollis | State: NY | Zip Code: 11412
Purpose of Disbursement:
Candidate Name: Clarke, Yvette, D., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00415331
Transaction ID : 8849562
Amount of Each Disbursement this Period: 3000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Brian Mast for Congress
Mailing Address: 2600 S Douglas Rd Ste 900
City: Coral Gables | State: FL | Zip Code: 33134
Purpose of Disbursement:
Candidate Name: Mast, Brian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 18
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00579896
Transaction ID : 8849563
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Donald Norcross For Congress
Mailing Address: PO Box 160
City: Collingswood | State: NJ | Zip Code: 08108
Purpose of Disbursement:
Candidate Name: Norcross, Donald, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00558320
Transaction ID : 8849564
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Friends Of Neal Dunn
Mailing Address: PO Box 16088
City: Panama City | State: FL | Zip Code: 32406
Purpose of Disbursement:
Candidate Name: Dunn, Neal, , , MD FACS
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 09 / D D 25 / Y Y Y Y 2017
FEC Identification Number: C C00582304
Transaction ID : 8849565
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Paul Gosar For Congress
Mailing Address: PO Box 2967
City: Prescott | State: AZ | Zip Code: 86302
Purpose of Disbursement:
Candidate Name: Gosar, Paul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 09 / D D 25 / Y Y Y Y 2017
FEC Identification Number: C C00461806
Transaction ID : 8849566
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Matsui For Congress
Mailing Address: PO Box 1738
City: Sacramento | State: CA | Zip Code: 95812
Purpose of Disbursement:
Candidate Name: Matsui, Doris, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 05
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 09 / D D 25 / Y Y Y Y 2017
FEC Identification Number: C C00409219
Transaction ID : 8849567
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Mark Takano For Congress
Mailing Address: PO Box 5214
City: Riverside | State: CA | Zip Code: 92517
Purpose of Disbursement:
Candidate Name: Takano, Mark, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 41
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00498667
Transaction ID : 8849568
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Sinema For Arizona
Mailing Address: PO Box 7586
City: Phoenix | State: AZ | Zip Code: 85011
Purpose of Disbursement:
Candidate Name: Sinema, Kyrsten, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00508804
Transaction ID : 8849569
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pittenger For Congress Llc
Mailing Address: PO Box 11207
City: Charlotte | State: NC | Zip Code: 28220
Purpose of Disbursement:
Candidate Name: Pittenger, Robert, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00514513
Transaction ID : 8849570
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Bob Casey For Senate Inc
Mailing Address: PO Box 58746
City: Philadelphia State: PA Zip Code: 19102
Purpose of Disbursement:
Candidate Name: Casey, Bob, P., Sen., Jr.
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: PA District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00431056
Transaction ID : 8849571
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Johnson For Congress
Mailing Address: PO Box 906
City: Marietta State: OH Zip Code: 45750
Purpose of Disbursement:
Candidate Name: Johnson, Bill, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00476820
Transaction ID : 8849572
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pioneer PAC
Mailing Address: 217 3rd Street, SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Tiberi's LPAC
Candidate Name: Pioneer PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00325357
Transaction ID : 8849573
Amount of Each Disbursement this Period: 5000.00
Tiberi's LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): McCaul For Congress, Inc
Mailing Address: 815-A Brazos St, Pmb 230
City: Austin | State: TX | Zip Code: 78701
Purpose of Disbursement:
Candidate Name: McCaul, Michael, T., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 10
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00392688
Transaction ID : 8849574
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Bucshon For Congress
Mailing Address: PO Box 250
City: Newburgh | State: IN | Zip Code: 47629
Purpose of Disbursement:
Candidate Name: Bucshon, Larry, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IN District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00468256
Transaction ID : 8849575
Amount of Each Disbursement this Period: 4625.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Families For James Lankford
Mailing Address: PO Box 1639
City: Bethany | State: OK | Zip Code: 73008
Purpose of Disbursement:
Candidate Name: Lankford, James, , Sen.,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: OK District:
Disbursement For: 2022 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00466482
Transaction ID : 8849576
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7625.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Friends Of Mike Lee Inc
Mailing Address: PO Box 1537
City: Salt Lake City | State: UT | Zip Code: 84110
Purpose of Disbursement:
Candidate Name: Lee, Mike, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: UT District:
Disbursement For: 2022 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 25 / 2017
FEC Identification Number: C C00473827
Transaction ID : 8849577
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): CMR Political Action Committee
Mailing Address: P.O. Box 2485
City: Springfield | State: VA | Zip Code: 22152
Purpose of Disbursement: McMorris Rodgers' LPAC
Candidate Name: CMR Political Action Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 26 / 2017
FEC Identification Number: C C00469429
Transaction ID : 8850110
Amount of Each Disbursement this Period: 2500.00
McMorris Rodgers' LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Welch For Congress
Mailing Address: PO Box 1682
City: Burlington | State: VT | Zip Code: 05402
Purpose of Disbursement:
Candidate Name: Welch, Peter, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VT District: 00
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 26 / 2017
FEC Identification Number: C C00413179
Transaction ID : 8850111
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): LEE PAC
Mailing Address: 499 South Capitol Street, SW #407
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Lee's LPAC
Candidate Name: LEE PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 26 / 2017
FEC Identification Number: C C00494302
Transaction ID : 8850114
Amount of Each Disbursement this Period: 5000.00
Lee's LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kind For Congress Committee
Mailing Address: 205 5th Avenue S Room 411
City: La Crosse | State: WI | Zip Code: 54601
Purpose of Disbursement:
Candidate Name: Kind, Ronald, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 28 / 2017
FEC Identification Number: C C00312017
Transaction ID : 8850952
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Crowley For Congress
Mailing Address: 84-56 Grand Avenue
City: Elmhurst | State: NY | Zip Code: 11373
Purpose of Disbursement:
Candidate Name: Crowley, Joseph, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 14
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 28 / 2017
FEC Identification Number: C C00338954
Transaction ID : 8850953
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 8500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Brian Higgins For Congress
Mailing Address: P.O. Box 28
City: Buffalo | State: NY | Zip Code: 14220
Purpose of Disbursement:
Candidate Name: Higgins, Brian, M., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 26
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 09 / D D 28 / Y Y Y Y 2017
FEC Identification Number: C C00401034
Transaction ID : 8850955
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Terri Sewell For Congress
Mailing Address: P.O. Box 1964
City: Birmingham | State: AL | Zip Code: 35201
Purpose of Disbursement:
Candidate Name: Sewell, Terri, A., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AL District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 09 / D D 28 / Y Y Y Y 2017
FEC Identification Number: C C00458976
Transaction ID : 8850958
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Marsha For Senate
Mailing Address: 4916 Thoroughbred Ln
City: Brentwood | State: TN | Zip Code: 37027
Purpose of Disbursement:
Candidate Name: Blackburn, Marsha, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 09 / D D 28 / Y Y Y Y 2017
FEC Identification Number: C C00376939
Transaction ID : 8850959
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Michael Burgess For Congress
Mailing Address: PO Box 2334
City: Denton | State: TX | Zip Code: 76202
Purpose of Disbursement:
Candidate Name: Burgess, Michael C., , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 26
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 28 / 2017
FEC Identification Number: C C00372532
Transaction ID : 8850960
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Republican National Committee
Mailing Address: 310 First Street SE
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Building Fund
Candidate Name: Republican National Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 29 / 2017
FEC Identification Number: C C00003418
Transaction ID : 8851773
Amount of Each Disbursement this Period: 15000.00
Building Fund
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Democratic National Committee
Mailing Address: 430 S Capitol Street SE 2nd Floor
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: 2017 Dues
Candidate Name: Democratic National Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 29 / 2017
FEC Identification Number: C C00010603
Transaction ID : 8851775
Amount of Each Disbursement this Period: 15000.00
2017 Dues
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 31000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Pascrell For Congress
Mailing Address: Pob 100
City: Teaneck | State: NJ | Zip Code: 07666
Purpose of Disbursement:
Candidate Name: Pascrell, William, , , Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C C00313510
Transaction ID : 8855886
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): John Lewis For Congress
Mailing Address: PO Box 2323
City: Atlanta | State: GA | Zip Code: 30301
Purpose of Disbursement:
Candidate Name: Lewis, John, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 05
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C C00202416
Transaction ID : 8855887
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Judy Chu For Congress
Mailing Address: 16633 Ventura Blvd # 1008
City: Encino | State: CA | Zip Code: 91436
Purpose of Disbursement:
Candidate Name: Chu, Judy, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 27
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C C00458125
Transaction ID : 8855888
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Delbene For Congress
Mailing Address: PO Box 487
City: Bothell State: WA Zip Code: 98041
Purpose of Disbursement:
Candidate Name: DelBene, Suzan, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C C00459099
Transaction ID : 8855889
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Victory in November Election PAC (VINE PAC)
Mailing Address: 607 14th Street NW Suite 800
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: Rep. Mike Thompson's LPAC
Candidate Name: Victory in November Election PAC (VINE PAC)
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C C00378695
Transaction ID : 8855890
Amount of Each Disbursement this Period: 2500.00
Rep. Mike Thompson's LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Larson For Congress
Mailing Address: PO Box 261172
City: Hartford State: CT Zip Code: 06126
Purpose of Disbursement:
Candidate Name: Larson, John, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 03 / 2017
FEC Identification Number: C C00330142
Transaction ID : 8855891
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Mooney for Congress
Mailing Address: P.O. Box 1863
City: Martinsburg | State: WV | Zip Code: 25402
Purpose of Disbursement:
Candidate Name: Mooney, Alexander, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WV District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00506774
Transaction ID : 8861996
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Collins For Congress
Mailing Address: PO Box 1295
City: Gainesville | State: GA | Zip Code: 30503
Purpose of Disbursement:
Candidate Name: Collins, Doug, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00502039
Transaction ID : 8861997
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Olson For Congress Committee
Mailing Address: PO Box 16381
City: Sugar Land | State: TX | Zip Code: 77496
Purpose of Disbursement:
Candidate Name: Olson, Peter, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 22
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00437913
Transaction ID : 8861998
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Vern Buchanan For Congress
Mailing Address: P. O. Box 48928
City: Sarasota | State: FL | Zip Code: 34230
Purpose of Disbursement:
Candidate Name: Buchanan, Vernon, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 13
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00412759
Transaction ID : 8861999
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Swalwell For Congress
Mailing Address: P.O. Box 2847
City: Dublin | State: CA | Zip Code: 94568
Purpose of Disbursement:
Candidate Name: Swalwell, Eric, M., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 15
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00502294
Transaction ID : 8862000
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Swalwell For Congress
Mailing Address: P.O. Box 2847
City: Dublin | State: CA | Zip Code: 94568
Purpose of Disbursement:
Candidate Name: Swalwell, Eric, M., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 15
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00502294
Transaction ID : 8862001
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): People For Ben
Mailing Address: PO Box 31129
City: Santa Fe | State: NM | Zip Code: 87594
Purpose of Disbursement:
Candidate Name: Lujan, Ben, Ray, Rep., Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NM District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00443689
Transaction ID : 8862003
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): 21st Century Majority Fund
Mailing Address: 6065 Roswell Rd. #2274
City: Atlanta | State: GA | Zip Code: 30328
Purpose of Disbursement: Isakson's LPAC
Candidate Name: 21st Century Majority Fund
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 11 / 2017
FEC Identification Number: C C00361956
Transaction ID : 8862004
Amount of Each Disbursement this Period: 2500.00
Isakson's LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Marsha For Senate
Mailing Address: 4916 Thoroughbred Ln
City: Brentwood | State: TN | Zip Code: 37027
Purpose of Disbursement:
Candidate Name: Blackburn, Marsha, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 28 / 2017
FEC Identification Number: C C00376939
Transaction ID : 8898459
Amount of Each Disbursement this Period: 2500.00
☒ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Marsha For Senate
Mailing Address: 4916 Thoroughbred Ln
City: Brentwood | State: TN | Zip Code: 37027
Purpose of Disbursement: Re-designated funds for trans. dated 9/28/2017
Category/Type: 011
Candidate Name: Blackburn, Marsha, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 07
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 13 / 2017
FEC Identification Number: C C00376939
Transaction ID : 8898460
Amount of Each Disbursement this Period: 156.25
☒ Memo Item: Re-designated funds for trans. dated 9/28/2017

B.
Full Name (Last, First, Middle Initial): Forward Together PAC
Mailing Address: 201 North Union Street
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement: Mark Warner's LPAC
Category/Type: 011
Candidate Name: Forward Together PAC
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00412791
Transaction ID : 8927540
Amount of Each Disbursement this Period: 5000.00
Mark Warner's LPAC
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): McSally For Congress
Mailing Address: PO Box 19128
City: Tucson | State: AZ | Zip Code: 85731
Purpose of Disbursement:
Category/Type: 011
Candidate Name: McSally, Martha, , Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00512236
Transaction ID : 8927541
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Paul Tonko For Congress
Mailing Address: 911 Central Avenue # 221
City: Albany State: NY Zip Code: 12206
Purpose of Disbursement:
Candidate Name: Tonko, Paul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00450049
Transaction ID : 8927542
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Thornberry For Congress Committee
Mailing Address: PO Box 9392
City: Amarillo State: TX Zip Code: 79105
Purpose of Disbursement:
Candidate Name: Thornberry, Mac, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 13
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00286187
Transaction ID : 8927543
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Who Dat PAC
Mailing Address: 499 S. Capitol St. SW Suite 422
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Richmond's LPAC
Candidate Name: Who Dat PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00500256
Transaction ID : 8927544
Amount of Each Disbursement this Period: 2500.00
Richmond's LPAC
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Richmond For Congress
Mailing Address: 1631 Elysian Fields, Suite 150
City: New Orleans | State: LA | Zip Code: 70126
Purpose of Disbursement:
Candidate Name: Richmond, Cedric, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: LA District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00451336
Transaction ID : 8927545
Amount of Each Disbursement this Period: 2150.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Lee, Sheila Jackson
Mailing Address: 4412 Almeda Road
City: Houston | State: TX | Zip Code: 77004
Purpose of Disbursement:
Candidate Name: Lee, Sheila, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 18
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00287904
Transaction ID : 8927548
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pallone For Congress
Mailing Address: PO Box 3176
City: Long Branch | State: NJ | Zip Code: 07740
Purpose of Disbursement:
Candidate Name: Pallone, Frank, , , Jr
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 31 / 2017
FEC Identification Number: C C00226928
Transaction ID : 8927549
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4650.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Angerholzer Broz Consulting
Mailing Address: 499 S Capitol St. SW, Suite 422
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Ruiz, Raul, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 36
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 08 / 2017
FEC Identification Number: C C00502575
Transaction ID : 8934839
Amount of Each Disbursement this Period: 350.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Angerholzer Broz Consulting
Mailing Address: 499 S Capitol St. SW, Suite 422
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Peters, Scott, Harvey, Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 52
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 08 / 2017
FEC Identification Number: C C00503110
Transaction ID : 8935057
Amount of Each Disbursement this Period: 350.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Stivers Victory Committee
Mailing Address: 4697 Winterset Drive
City: Columbus State: OH Zip Code: 43220
Purpose of Disbursement: Stivers JFC
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C
Transaction ID : 8939130
Amount of Each Disbursement this Period: 20000.00
Stivers JFC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 20700.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Rob Woodall For Congress
Mailing Address: Post Office Box 1871
City: Lawrenceville | State: GA | Zip Code: 30046
Purpose of Disbursement:
Candidate Name: Woodall, Rob, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00482307
Transaction ID : 8939131
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Blum For Congress
Mailing Address: 2728 Asbury Road Suite 400
City: Dubuque | State: IA | Zip Code: 52001
Purpose of Disbursement:
Candidate Name: Blum, Rodney, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00543926
Transaction ID : 8939133
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Val Demings for Congress
Mailing Address: P.O. Box 536926
City: Orlando | State: FL | Zip Code: 32853
Purpose of Disbursement:
Candidate Name: Demings, Valdez, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 10
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00590489
Transaction ID : 8939134
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Carper For Senate
Mailing Address: PO Box 2882
City: Wilmington | State: DE | Zip Code: 19805
Purpose of Disbursement:
Candidate Name: Carper, Thomas, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: DE District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00349217
Transaction ID : 8939135
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Mike Gallagher For Wisconsin
Mailing Address: PO Box 1027
City: Green Bay | State: WI | Zip Code: 54305
Purpose of Disbursement:
Candidate Name: Gallagher, Michael, John, Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00610212
Transaction ID : 8939136
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Mike Rogers For Congress
Mailing Address: 123 East 13th Street
City: Anniston | State: AL | Zip Code: 36201
Purpose of Disbursement:
Candidate Name: Rogers, Mike, D., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AL District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00367862
Transaction ID : 8939137
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): First in Freedom PAC
Mailing Address: 824 S Milledge Ave, Suite 101
City: Athens | State: GA | Zip Code: 30605
Purpose of Disbursement: Richard Hudson LPAC
Candidate Name: First in Freedom PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00540146
Transaction ID : 8939138
Amount of Each Disbursement this Period: 2500.00
Richard Hudson LPAC
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Kuster For Congress, Inc
Mailing Address: PO Box 1498
City: Concord | State: NH | Zip Code: 03302
Purpose of Disbursement:
Candidate Name: Kuster, Ann, McLane, Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NH District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00462861
Transaction ID : 8939139
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Friends Of Elizabeth Esty
Mailing Address: PO Box 61
City: Cheshire | State: CT | Zip Code: 06410
Purpose of Disbursement:
Candidate Name: Esty, Elizabeth, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 05
Disbursement For: 2017 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00494203
Transaction ID : 8939140
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 9500.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Marc Veasey Congressional Campaign Committee
Mailing Address: PO Box 50084
City: Fort Worth | State: TX | Zip Code: 76105
Purpose of Disbursement:
Candidate Name: Veasey, Marc, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 33
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00506832
Transaction ID : 8939141
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Denham For Congress
Mailing Address: 2150 River Plaza Dr., #150
City: Sacramento | State: CA | Zip Code: 95833
Purpose of Disbursement:
Candidate Name: Denham, Jeff, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 19
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00473272
Transaction ID : 8939142
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Friends Of Dave Joyce
Mailing Address: 320 Kenarden Drive
City: Cleveland | State: OH | Zip Code: 44143
Purpose of Disbursement:
Candidate Name: Joyce, Dave, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 14
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00527457
Transaction ID : 8939143
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Young Hoosier Victory Fund
Mailing Address: PO Box 1053
City: Bloomington State: IN Zip Code: 47402
Purpose of Disbursement: General 2016 Debt
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C
Transaction ID : 8939144
Amount of Each Disbursement this Period: 1000.00
General 2016 Debt
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kinzinger For Congress
Mailing Address: PO Box 2365
City: Ottawa State: IL Zip Code: 61350
Purpose of Disbursement:
Candidate Name: Kinzinger, Adam, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 11
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00458877
Transaction ID : 8939146
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Texans For Jodey Arrington
Mailing Address: PO Box 6687
City: Lubbock State: TX Zip Code: 79493
Purpose of Disbursement:
Candidate Name: Arrington, Jodey, Cook, Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 19
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00588657
Transaction ID : 8939147
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Matsui For Congress
Mailing Address: PO Box 1738
City: Sacramento | State: CA | Zip Code: 95812
Purpose of Disbursement:
Candidate Name: Matsui, Doris, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 05
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00409219
Transaction ID : 8939148
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Handel For Congress, Inc.
Mailing Address: 4010 Old Milton Pkwy
City: Alpharetta | State: GA | Zip Code: 30005
Purpose of Disbursement:
Candidate Name: Handel, Karen, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 10 / 2017
FEC Identification Number: C C00633362
Transaction ID : 8939149
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Martha Roby For Congress
Mailing Address: PO Box 195
City: Montgomery | State: AL | Zip Code: 36101
Purpose of Disbursement:
Candidate Name: Roby, Martha, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AL District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00462143
Transaction ID : 8943383
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Toomey Prosperity Fund
Mailing Address: 228 S Washington Street, Suite 115
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement: Toomey JFC
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C
Transaction ID : 8943384
Amount of Each Disbursement this Period: 1000.00
Toomey JFC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Judy Chu For Congress
Mailing Address: 16633 Ventura Blvd # 1008
City: Encino | State: CA | Zip Code: 91436
Purpose of Disbursement:
Candidate Name: Chu, Judy, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 27
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00458125
Transaction ID : 8943385
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Bridge PAC
Mailing Address: 499 South Capitol Street, SW, Suite 422
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Clyburn's LPAC
Candidate Name: Bridge PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00399196
Transaction ID : 8943386
Amount of Each Disbursement this Period: 2500.00
Clyburn's LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Coffman for Congress Inc.
Mailing Address: 9249 South Broadway Blvd. #200-501
City: Highlands Ranch | State: CO | Zip Code: 80129
Purpose of Disbursement:
Candidate Name: Coffman, Mike, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CO District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00441006
Transaction ID : 8943387
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): The Congressman Joe Barton Committee
Mailing Address: P.O. Box 1444
City: Ennis | State: TX | Zip Code: 75120
Purpose of Disbursement:
Candidate Name: Barton, Joe, L., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00195065
Transaction ID : 8943388
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Elise For Congress
Mailing Address: PO Box 500
City: Glens Falls | State: NY | Zip Code: 12801
Purpose of Disbursement:
Candidate Name: Stefanik, Elise, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00547893
Transaction ID : 8943389
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Joe Wilson For Congress
Mailing Address: PO Box 2145
City: West Columbia | State: SC | Zip Code: 29171
Purpose of Disbursement:
Candidate Name: Wilson, Joe, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: SC District: 00
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00368522
Transaction ID : 8943390
Amount of Each Disbursement this Period: 3000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Kansas Leadership PAC
Mailing Address: PO Box 26141
City: Alexandria | State: VA | Zip Code: 22313
Purpose of Disbursement: Marshall's LPAC
Candidate Name: Kansas Leadership PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00632323
Transaction ID : 8943391
Amount of Each Disbursement this Period: 1000.00
Marshall's LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Chris Coons For Delaware
Mailing Address: PO Box 9900
City: Newark | State: DE | Zip Code: 19714
Purpose of Disbursement:
Candidate Name: Coons, Christopher, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: DE District:
Disbursement For: 2020 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2017
FEC Identification Number: C C00475392
Transaction ID : 8943392
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Friends Of Erik Paulsen
Mailing Address: P.O. Box 44369, 250 Prairie Center Drive
City: Eden Prairie | State: MN | Zip Code: 55344
Purpose of Disbursement:
Candidate Name: Paulsen, Erik, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MN District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00439661
Transaction ID : 8955484
Amount of Each Disbursement this Period: 1750.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Friends Of Erik Paulsen
Mailing Address: P.O. Box 44369, 250 Prairie Center Drive
City: Eden Prairie | State: MN | Zip Code: 55344
Purpose of Disbursement:
Candidate Name: Paulsen, Erik, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MN District: 03
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00439661
Transaction ID : 8955495
Amount of Each Disbursement this Period: 750.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Excelsior PAC
Mailing Address: 2470 Daniells Br Rd, Suite 121
City: Athens | State: GA | Zip Code: 30606
Purpose of Disbursement: Reed's LPAC
Candidate Name: Excelsior PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00541078
Transaction ID : 8955496
Amount of Each Disbursement this Period: 1000.00
Reed's LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): DUTCH PAC
Mailing Address: 499 S. Capitol St. SW, Suite 422
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Ruppersberger's LPAC
Category/Type: 011
Candidate Name: DUTCH PAC
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00448001
Transaction ID : 8955528
Amount of Each Disbursement this Period: 3500.00
Ruppersberger's LPAC
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Friends Of David Schweikert
Mailing Address: 228 S Washington Street, Ste 115
City: Alexandria | State: VA | Zip Code: 22314
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Schweikert, David, , Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00540617
Transaction ID : 8955529
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Lahood For Congress
Mailing Address: P.O. Box 10735
City: Peoria | State: IL | Zip Code: 61612
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Lahood, Darin, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 18
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00575050
Transaction ID : 8955530
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Victory Now PAC
Mailing Address: 10605 Concord Street, Suite 202
City: Kensington | State: MD | Zip Code: 20895
Purpose of Disbursement: Van Hollen's LPAC
Category/Type: 011
Candidate Name: Victory Now PAC
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00416743
Transaction ID : 8955531
Amount of Each Disbursement this Period: 1000.00
Van Hollen's LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Devin Nunes Campaign Committee
Mailing Address: PO Box 6545
City: Visalia | State: CA | Zip Code: 93290
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Nunes, Devin, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 21
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00370056
Transaction ID : 8955532
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Debbie Dingell For Congress
Mailing Address: 19855 W. Outer Dr., Ste 103 Ae
City: Dearborn | State: MI | Zip Code: 48124
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Dingell, Debbie, Insley, Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 12
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00558213
Transaction ID : 8955533
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): David Scott For Congress
Mailing Address: P.O. Box 960821
City: Riverdale | State: GA | Zip Code: 30296
Purpose of Disbursement:
Candidate Name: Scott, David, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 13
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00369801
Transaction ID : 8955535
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Jeff Duncan For Congress
Mailing Address: PO Box 845
City: Laurens | State: SC | Zip Code: 29360
Purpose of Disbursement:
Candidate Name: Duncan, Jeff, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: SC District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00460550
Transaction ID : 8955536
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Carper For Senate
Mailing Address: PO Box 2882
City: Wilmington | State: DE | Zip Code: 19805
Purpose of Disbursement:
Candidate Name: Carper, Thomas, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: DE District:
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00349217
Transaction ID : 8955537
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Carper For Senate
Mailing Address: PO Box 2882
City: Wilmington | State: DE | Zip Code: 19805
Purpose of Disbursement:
Candidate Name: Carper, Thomas, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: DE District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00349217
Transaction ID : 8955538
Amount of Each Disbursement this Period: 500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Hammond For Congress
Mailing Address: PO Box 27173
City: Las Vegas | State: NV | Zip Code: 89126
Purpose of Disbursement:
Candidate Name: Hammond, Scott, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NV District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00649418
Transaction ID : 8955539
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Kenny Marchant For Congress
Mailing Address: PO Box 110187
City: Carrollton | State: TX | Zip Code: 75011
Purpose of Disbursement:
Candidate Name: Marchant, Kenny, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 24
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00393348
Transaction ID : 8955540
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Angerholzer Broz Consulting
Mailing Address: 499 S Capitol St. SW, Suite 422
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement:
Candidate Name: Richmond, Cedric, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: LA District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00451336
Transaction ID : 8955543
Amount of Each Disbursement this Period: 350.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Republic Strategies, LLC
Mailing Address: 216 Woodland Terrace
City: Alexandria | State: VA | Zip Code: 22302
Purpose of Disbursement: 5/11 Lunch
Candidate Name: Heller, Dean, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: NV District:
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00494229
Transaction ID : 8955547
Amount of Each Disbursement this Period: 750.00
5/11 Lunch
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Republic Strategies, LLC
Mailing Address: 216 Woodland Terrace
City: Alexandria | State: VA | Zip Code: 22302
Purpose of Disbursement: 5/18/17 Lunch
Candidate Name: Meehan, Patrick, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 07
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00466870
Transaction ID : 8955551
Amount of Each Disbursement this Period: 750.00
5/18/17 Lunch
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1850.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Republic Strategies, LLC
Mailing Address: 216 Woodland Terrace
City: Alexandria | State: VA | Zip Code: 22302
Purpose of Disbursement: 11/30/17 Dinner
Category/Type: 011
Candidate Name: Marchant, Kenny, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 24
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00393348
Transaction ID : 8955554
Amount of Each Disbursement this Period: 750.00
11/30/17 Dinner
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Republic Strategies, LLC
Mailing Address: 216 Woodland Terrace
City: Alexandria | State: VA | Zip Code: 22302
Purpose of Disbursement: 12/7/17 Lunch
Category/Type: 011
Candidate Name: Paulsen, Erik, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: MN District: 03
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2017
FEC Identification Number: C C00439661
Transaction ID : 8955556
Amount of Each Disbursement this Period: 750.00
12/7/17 Lunch
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Justin Fareed For Congress
Mailing Address: PO Box 5068
City: Santa Barbara | State: CA | Zip Code: 93105
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Fareed, Justin, , ,
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 24
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 14 / 2017
FEC Identification Number: C C00572560
Transaction ID : 9458393
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Steve Ferrara For Congress
Mailing Address: PO Box 97130
City: Phoenix | State: AZ | Zip Code: 85060
Purpose of Disbursement:
Candidate Name: Ferrara, Steve, , , MD
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 14 / 2017
FEC Identification Number: C C00640268
Transaction ID : 9458394
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Doyle For Congress Committee
Mailing Address: 205 Hawthorne Ct
City: Pittsburgh | State: PA | Zip Code: 15221
Purpose of Disbursement:
Candidate Name: Doyle, Michael, F., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 14
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 14 / 2017
FEC Identification Number: C C00290064
Transaction ID : 9458398
Amount of Each Disbursement this Period: 4000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Patriots For Perry
Mailing Address: PO Box 147
City: Red Lion | State: PA | Zip Code: 17356
Purpose of Disbursement:
Candidate Name: Perry, Scott, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 04
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00510164
Transaction ID : 9461178
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 8000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Donald Norcross For Congress
Mailing Address: PO Box 160
City: Collingswood | State: NJ | Zip Code: 08108
Purpose of Disbursement:
Candidate Name: Norcross, Donald, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00558320
Transaction ID : 9461179
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Joe Wilson For Congress
Mailing Address: PO Box 2145
City: West Columbia | State: SC | Zip Code: 29171
Purpose of Disbursement:
Candidate Name: Wilson, Joe, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: SC District: 00
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00368522
Transaction ID : 9461180
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Vote to Elect Republicans Now PAC (VERN PAC)
Mailing Address: P.O. Box 48928
City: Sarasota | State: FL | Zip Code: 34236
Purpose of Disbursement: Buchanan's LPAC
Candidate Name: Vote to Elect Republicans Now PAC (VERN PAC)
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00431403
Transaction ID : 9461181
Amount of Each Disbursement this Period: 2000.00
Buchanan's LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Friends of Blaine Luetkemeyer
Mailing Address: 228 S Washington St Suite 115
City: Alexandira | State: VA | Zip Code: 22314
Purpose of Disbursement:
Candidate Name: Luetkemeyer, W., Blaine, ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00451229
Transaction ID : 9461182
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Cartwright For Congress
Mailing Address: PO Box 414
City: Scranton | State: PA | Zip Code: 18501
Purpose of Disbursement:
Candidate Name: Cartwright, Matt, A., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 17
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00509968
Transaction ID : 9461183
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Trey For Congress
Mailing Address: PO Box 421
City: Jeffersonville | State: IN | Zip Code: 47130
Purpose of Disbursement:
Candidate Name: Hollingsworth, Trey, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IN District: 09
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00590463
Transaction ID : 9461184
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Shore PAC
Mailing Address: P.O. Box 3157
City: Long Branch | State: NJ | Zip Code: 07740
Purpose of Disbursement: Pallone's LPAC
Candidate Name: Shore PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00410308
Transaction ID : 9461185
Amount of Each Disbursement this Period: 3500.00
Pallone's LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Pallone For Congress
Mailing Address: PO Box 3176
City: Long Branch | State: NJ | Zip Code: 07740
Purpose of Disbursement:
Candidate Name: Pallone, Frank, , , Jr
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00226928
Transaction ID : 9461186
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): McSally For Congress
Mailing Address: PO Box 19128
City: Tucson | State: AZ | Zip Code: 85731
Purpose of Disbursement:
Candidate Name: McSally, Martha, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 02
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00512236
Transaction ID : 9461187
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Alan Lowenthal For Congress
Mailing Address: 16633 Ventura Blvd # 1008
City: Encino | State: CA | Zip Code: 91436
Purpose of Disbursement:
Candidate Name: Lowenthal, Alan, , Rep., PhD
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 47
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00498212
Transaction ID : 9461188
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Walberg For Congress
Mailing Address: PO Box 1362
City: Jackson | State: MI | Zip Code: 49204
Purpose of Disbursement:
Candidate Name: Walberg, Timothy, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00390724
Transaction ID : 9461189
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Buddy Carter For Congress
Mailing Address: PO Box 10570
City: Savannah | State: GA | Zip Code: 31412
Purpose of Disbursement:
Candidate Name: Carter, Earl, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00543967
Transaction ID : 9461190
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Brian Mast for Congress
Mailing Address: 2600 S Douglas Rd Ste 900
City: Coral Gables | State: FL | Zip Code: 33134
Purpose of Disbursement:
Candidate Name: Mast, Brian, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 18
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00579896
Transaction ID : 9461191
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): AMI PAC
Mailing Address: PO Box 582496
City: Elk Grove | State: CA | Zip Code: 95758
Purpose of Disbursement: Ami Bera LPAC
Candidate Name: AMI PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00561779
Transaction ID : 9461192
Amount of Each Disbursement this Period: 5000.00
Ami Bera LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Pete Sessions For Congress
Mailing Address: PO Box 823047
City: Dallas | State: TX | Zip Code: 75382
Purpose of Disbursement:
Candidate Name: Sessions, Pete, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 32
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00303305
Transaction ID : 9461193
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): CMR Political Action Committee
Mailing Address: P.O. Box 2485
City: Springfield | State: VA | Zip Code: 22152
Purpose of Disbursement: McMorris Rodgers' LPAC
Category/Type: 011
Candidate Name: CMR Political Action Committee
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00469429
Transaction ID : 9461194
Amount of Each Disbursement this Period: 2500.00
McMorris Rodgers' LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Bill Nelson For U S Senate
Mailing Address: 972 W Whitmire Drive
City: Melbourne | State: FL | Zip Code: 32935
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Nelson, Bill, , Sen.,
Office Sought: ☐ House ☒ Senate ☐ President
State: FL District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00344051
Transaction ID : 9461195
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Mike Kelly For Congress
Mailing Address: PO Box 476
City: Lyndora | State: PA | Zip Code: 16045
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Kelly, George, , , Jr
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00474189
Transaction ID : 9461196
Amount of Each Disbursement this Period: 4000.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Anthony Brown For Congress
Mailing Address: 12138 Central Ave #671
City: Bowie | State: MD | Zip Code: 20721
Purpose of Disbursement:
Candidate Name: Brown, Anthony, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 04
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00574640
Transaction ID : 9461197
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Coffman for Congress Inc.
Mailing Address: 9249 South Broadway Blvd. #200-501
City: Highlands Ranch | State: CO | Zip Code: 80129
Purpose of Disbursement:
Candidate Name: Coffman, Mike, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CO District: 06
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00441006
Transaction ID : 9461198
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Lahood For Congress
Mailing Address: P.O. Box 10735
City: Peoria | State: IL | Zip Code: 61612
Purpose of Disbursement:
Candidate Name: Lahood, Darin, , ,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 18
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00575050
Transaction ID : 9461199
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): McCaskill For Missouri
Mailing Address: Po Box 6771
City: St Louis | State: MO | Zip Code: 63144
Purpose of Disbursement:
Candidate Name: McCaskill, Claire, , ,
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: MO District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00414961
Transaction ID : 9461200
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Gallego For Arizona
Mailing Address: PO Box 1710
City: Phoenix | State: AZ | Zip Code: 85001
Purpose of Disbursement:
Candidate Name: Gallego, Ruben, , Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 07
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00558627
Transaction ID : 9461201
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): LEGPAC
Mailing Address: 38 Ivy St., SE
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Cardin's LPAC
Candidate Name: LEGPAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00385534
Transaction ID : 9461202
Amount of Each Disbursement this Period: 1500.00
Cardin's LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Making Investments Majority Insured (MIMI PAC)
Mailing Address: 9070 Irvine Center Drive #150
City: Irvine | State: CA | Zip Code: 92618
Purpose of Disbursement: Mimi Walters' LPAC
Candidate Name: Making Investments Majority Insured (MIMI PAC)
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 18 / 2017
FEC Identification Number: C C00564658
Transaction ID : 9461203
Amount of Each Disbursement this Period: 1000.00
Mimi Walters' LPAC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Wells PAC
Mailing Address: 2470 Daniels Bridge Rd Suite 121
City: Athens | State: GA | Zip Code: 30606
Purpose of Disbursement: Void - Wells PAC
Candidate Name: Wells PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 20 / 2017
FEC Identification Number: C C00500793
Transaction ID : 9461465
Amount of Each Disbursement this Period: – 3500.00
Void - Wells PAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Wells PAC
Mailing Address: 2470 Daniels Bridge Rd Suite 121
City: Athens | State: GA | Zip Code: 30606
Purpose of Disbursement: Austin Scott Leadership PAC
Candidate Name: Wells PAC
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C C00500793
Transaction ID : 9463012
Amount of Each Disbursement this Period: 3500.00
Austin Scott Leadership PAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Suozzi For Congress
Mailing Address: PO Box 669
City: Glen Cove | State: NY | Zip Code: 11542
Purpose of Disbursement:
Candidate Name: Suozzi, Thomas, R., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 03
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C C00607200
Transaction ID : 9463013
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Bob Casey For Senate Inc
Mailing Address: PO Box 58746
City: Philadelphia | State: PA | Zip Code: 19102
Purpose of Disbursement:
Candidate Name: Casey, Bob, P., Sen., Jr.
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: PA District:
Disbursement For: 2018 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C C00431056
Transaction ID : 9463014
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Bob Casey For Senate Inc
Mailing Address: PO Box 58746
City: Philadelphia | State: PA | Zip Code: 19102
Purpose of Disbursement:
Candidate Name: Casey, Bob, P., Sen., Jr.
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: PA District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C C00431056
Transaction ID : 9463015
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Care America
Mailing Address: PO Box 30844
City: Bethesda | State: MD | Zip Code: 20824
Purpose of Disbursement: Sam Johnson JFC
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C
Transaction ID : 9463016
Amount of Each Disbursement this Period: 2500.00
Sam Johnson JFC
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Comstock For Congress
Mailing Address: PO Box 831
City: Mc Lean | State: VA | Zip Code: 22101
Purpose of Disbursement:
Candidate Name: Comstock, Barbara, J., Rep.,
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 10
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C C00554261
Transaction ID : 9463017
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): America Works Committee
Mailing Address: 607 14th Street N.w. Suite 800
City: Washington | State: DC | Zip Code: 20005
Purpose of Disbursement: Sen Brown LPAC
Candidate Name: America Works Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2017
FEC Identification Number: C C00331694
Transaction ID : 9463018
Amount of Each Disbursement this Period: 2500.00
Sen Brown LPAC
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): CMR Political Action Committee
Mailing Address: P.O. Box 2485
City: Springfield | State: VA | Zip Code: 22152
Purpose of Disbursement: Void - CMR Political Action Committee
Category/Type: 011
Candidate Name: CMR Political Action Committee
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C C00469429
Transaction ID : 9467381
Amount of Each Disbursement this Period: – 2500.00
Void - CMR Political Action Committee
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Texans For Jodey Arrington
Mailing Address: PO Box 6687
City: Lubbock | State: TX | Zip Code: 79493
Purpose of Disbursement: Void - Texans For Jodey Arrington
Category/Type: 011
Candidate Name: Arrington, Jodey, Cook, Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 19
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C C00588657
Transaction ID : 9467382
Amount of Each Disbursement this Period: – 1000.00
Void - Texans For Jodey Arrington
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Richard E Neal For Congress Committee
Mailing Address: 76 Magnolia Terrace
City: Springfield | State: MA | Zip Code: 01108
Purpose of Disbursement: Void - Richard E Neal For Congress Committee
Category/Type: 011
Candidate Name: Neal, Richard, E., Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: MA District: 01
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C C00226522
Transaction ID : 9467383
Amount of Each Disbursement this Period: – 2500.00
Void - Richard E Neal For Congress Committee
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial): Pascrell For Congress
Mailing Address: Pob 100
City: Teaneck | State: NJ | Zip Code: 07666
Purpose of Disbursement: Void - Pascrell For Congress
Category/Type: 011
Candidate Name: Pascrell, William, , , Jr.
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 08
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C C00313510
Transaction ID : 9467384
Amount of Each Disbursement this Period: – 2500.00
Void - Pascrell For Congress
☐ Memo Item

B. Full Name (Last, First, Middle Initial): CMR Political Action Committee
Mailing Address: P.O. Box 2485
City: Springfield | State: VA | Zip Code: 22152
Purpose of Disbursement: McMorris Rodgers' LPAC
Category/Type: 011
Candidate Name: CMR Political Action Committee
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C C00469429
Transaction ID : 9467385
Amount of Each Disbursement this Period: 2500.00
McMorris Rodgers' LPAC
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Texans For Jodey Arrington
Mailing Address: PO Box 6687
City: Lubbock | State: TX | Zip Code: 79493
Purpose of Disbursement:
Category/Type: 011
Candidate Name: Arrington, Jodey, Cook, Rep.,
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 19
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 22 / 2017
FEC Identification Number: C C00588657
Transaction ID : 9467386
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 471125.00

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)
☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial): Caldwell, Paul, E, , III, MD
Mailing Address: PO Box 71690
City: Richmond | State: VA | Zip Code: 23255
Purpose of Disbursement: Refund of contribution
Candidate Name:
Category/Type: 010
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 17 / 2017
FEC Identification Number: C
Transaction ID : 8944946
Amount of Each Disbursement this Period: 500.00
Refund of contribution
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Richer, Ross, J, , MD
Mailing Address: 150 Hillspoint Rd
City: Westport | State: CT | Zip Code: 06880
Purpose of Disbursement: Contribution made in error
Candidate Name:
Category/Type: 010
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 27 / 2017
FEC Identification Number: C
Transaction ID : 8949743
Amount of Each Disbursement this Period: 500.00
Contribution made in error
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: | State: | Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: / /
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 1000.00