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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For	Other Than An A	utnorizea	Committe	e		Office Use Only
NAME OF TYPE COMMITTEE (in full)	PE OR PRINT ▼		ple: If typin	g, type	12FE4M	5
, ,	E ASSOCIATIO			(ADLI DAC	
AMERICAN AMBULANC	LASSOCIATIO	NFEDER	ALPAU		IBU-PAC)
ADDRESS (number and street)	420 New York Ave NW					
Check if different	ith Floor					
than previously reported. (ACC)	Washington				DC [20005
2. FEC IDENTIFICATION NUME	BER ▼	CITY A		5	STATE A	ZIP CODE ▲
C C00168070	3.	IS THIS REPORT	x (1	EW N) OR	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	Feb 20 (M2)		May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)		un 20 (M6)		20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)	L J	ul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
July 15	(c) 12-Day PRE-Election	P	rimary (12P		General	(12G) Runoff (12R)
Quarterly Report (Q2) October 15	Report for the	: C	Convention (12C)	Special (12S)
Quarterly Report (Q3) January 31	Flo	ction on	M = M /	D D /	YIYIYIY	in the
Year-End Report (YE) July 31 Mid-Year		CHOIT OIT				State of
Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the		ieneral (30G)	Runoff (3	OR) Special (30S)
Termination Report (TER)		ction on	M = M /	D D /	Y = Y = Y = Y	in the State of
5. Covering Period 04	01 201	9	through	M M 06	30 /	2019
I certify that I have examined this F		of my knowl	edge and b	elief it is tru	e, correct and	d complete.
Type or Print Name of Treasurer	Rose, Julie Ann, , ,					
Signature of Treasurer Rose, Juli	e Ann, , ,	[I	Electronically	Filed] D	ate 07	/ 15 / Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
NOTE: Submission of false, erroneous	, or incomplete informa	ation may subj	ect the pers	on signing th	is Report to th	ne penalties of 52 U.S.C. § 30109
Office Use Only						FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1, 2019		156124.61
(b) Cash on Hand at Beginning of Reporting Period	150512.10	
(c) Total Receipts (from Line 19)	4392.49	9779.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	154904.59	165904.59
٦	otal Disbursements (from Line 31)	9500.00	20500.00
F	Cash on Hand at Close of Reporting Period subtract Line 7 from Line 6(d))	145404.59	145404.59
t	Debts and Obligations Owed TO he Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
t	Debts and Obligations Owed BY The Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

01 2019 06 30 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 4329.99 8613.32 (i) Itemized (use Schedule A)..... 62.50 1166.66 (ii) Unitemized (iii) TOTAL (add 9779.98 4392.49 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 9779.98 4392.49 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 9779.98 4392.49 20. Total Federal Receipts 4392.49 9779.98 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	I. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(a) Alloca	Expenditures: ——ated Federal/Non-Federal		
	ty (from Schedule H4) Federal Share	0.00	0.00
(1)	ederal Griare	45 45 45 45	
٠,	Non-Federal Share	0.00	0.00
	Federal Operating	0.00	0.00
	nditures Operating Expenditures	0.00	0.00
` '	21(a)(i), (a)(ii), and (b))	0.00	0.00
	to Affiliated/Other Party	4	
Committee Contribution	98	0.00	0.00
Federal C	andidates/Committees Political Committees	9500.00	20500.00
	ent Expenditures	0.00	
Coordinate	dule E)ed Party Expenditures	0.00	0.00
(52 U.S.C (use Sche	. § 30116(d)) dule F)	0.00	0.00
•	·	4 4	5.50
Loan Rep	ayments Made	0.00	0.00
	. –		2.00
	def Contributions To:	0.00	0.00
	duals/Persons Other Political Committees	0.00	0.00
111011	Tomical Committees	0.00	0.00
(b) Politic	cal Party Committees	0.00	0.00
` '	Political Committees		
	as PACs)	0.00	0.00
` '	Contribution Refunds		
(add	Lines 28(a), (b), and (c))	0.00	0.00
Other Disl	oursements (Including		
Non-Fede	ral Donations)	0.00	0.00
Federal F	lection Activity (52 U.S.C. § 30101(20))		
	ated Federal Election Activity		
. ,	Schedule H6)		
(i) Fe	deral Share	0.00	0.00
	evin" Share	0.00	0.00
, ,	ral Election Activity Paid Bly With Federal Funds		
	Federal Election Activity (add	0.00	0.00
. ,	30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
		4	
	ursements (add Lines 21(c), 22,		
23, 24, 25	5, 26, 27, 28(d), 29 and 30(c))	9500.00	20500.00
Total Fode	eral Disbursements	7 7	
	Line 21(a)(ii) and Line 30(a)(ii)		
	31)	9500.00	20522.22
20	,	900.00	20500.00

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 5				
	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	4392.49	9779.98				
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00				
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	4392.49	9779.98				
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00				
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00				

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

Use separate schedule(s) for each category of the

F	OR	LINE	PAGE	6	OF	15			
(check only one)									
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Baird, Shawn, , , Date of Receipt Mailing Address 1346 SE Tenind St 2019 13 City Zip Code State Transaction ID: SA11AI.9173 OR Portland 97202 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION Woodbern Ambulance Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baxter, Bruce, , , Date of Receipt Mailing Address 5 Shapleigh Ave 2019 City State Zip Code Transaction ID: SA11AI.9164 MA Haverhill 01830 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) New Britain EMS INDIVIDUAL CONTRIBUTION CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Baxter, Bruce, , , Date of Receipt Mailing Address 5 Shapleigh Ave 09 2019 City State Zip Code Transaction ID: SA11AI.9169 MA Haverhill 01830 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION New Britain EMS CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 325.00 SUBTOTAL of Receipts This Page (optional).....

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and add	dress of any political committee	to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE A	SSOCIATION	N FEDERAL PAC (AK	A AMBU-PAC)				
Full Name of Individual (Last, First, Middle Baxter, Bruce, , , Mailing Address 5 Shapleigh Ave	Initial) or Full Org	anization Name	Date of Receipt				
City Haverhill	State MA	Zip Code 01830	06 13 2019 Transaction ID : SA11AI.9183				
FEC ID number of contributing federal political committee.	C	01030	Amount of Each Receipt this Period 100.00				
Name of Employer (for Individual) New Britain EMS Receipt For:	CEO	ation (for Individual)	Memo Item INDIVIDUAL CONTRIBUTION				
Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 600.00					
Full Name of Individual (Last, First, Middle Berry, Dale, , , Mailing Address 1200 State Circle	nitial) or Full Org	anization Name	Date of Receipt 06 13 2019				
City Ann Arbor FEC ID number of contributing federal political committee.	State MI	Zip Code 48108	Transaction ID : SA11AI.9178 Amount of Each Receipt this Period 250.00				
Name of Employer (for Individual) Huron Valley Ambulance Receipt For: Primary General Other (specify) ▼	Presid	pation (for Individual) dent ear-to-Date ▼ 500.00	Memo Item INDIVIDUAL CONTRIBUTION				
Full Name of Individual (Last, First, Middle Carbonneau, Janice, , , Mailing Address 54 Ridgewood Drive City Atkinson	State NH	Zip Code 03811	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
FEC ID number of contributing federal political committee. Name of Employer (for Individual) New Britain EMS Receipt For: Primary General Other (specify)	Assista	eation (for Individual) ant CEO ear-to-Date ▼ 300.00	Memo Item INDIVIDUAL CONTRIBUTION				
SUBTOTAL of Receipts This Page (optional)	·····	500.00				
TOTAL This Period (last page this line numl	per only)						

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gault, Debora Mary, , , Date of Receipt Mailing Address 5502 North West Highway 09 2019 State Zip Code Transaction ID: SA11AI.9163 WI Waterford 53185 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **AMR VP Federal Reimbursements** INDIVIDUAL CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	333.32	
Full Name of Individual (Last, First, Middle Gault, Debora Mary, , , Mailing Address 5502 North West Highway City Waterford FEC ID number of contributing federal political committee. Name of Employer (for Individual) AMR Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State	Date of Receipt M M
Full Name of Individual (Last, First, Middle Gault, Debora Mary, , , Mailing Address 5502 North West Highway City Waterford FEC ID number of contributing federal political committee. Name of Employer (for Individual) AMR Receipt For: Primary General Other (specify)	<u> </u>	Date of Receipt M M M / D D / 2019 Transaction ID: SA11AI.9182 Amount of Each Receipt this Period 88.33 Memo Item INDIVIDUAL CONTRIBUTION
	per only)	254.99
		FEC Schedule A (Form 3X) Rev. 06/20

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

Use separate schedule(s) for each category of the

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hall, Lavonne, N/A, Ms, Date of Receipt Mailing Address 1001 21st St. 2019 City Zip Code State Transaction ID: SA11AI.9161 CA Bakersfield 93301 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hall, Lavonne, N/A, Ms, Date of Receipt Mailing Address 1001 21st St. 2019 City State Zip Code Transaction ID: SA11AI.9166 Bakersfield CA 93301 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) N/A INDIVIDUAL CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hall, Lavonne, N/A, Ms. Date of Receipt Mailing Address 1001 21st St. 05 2019 City State Zip Code Transaction ID: SA11AI.9171 CA Bakersfield 93301 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Howell, Jon, , , Date of Receipt Mailing Address 251 Bishop Farm Way 2019 13 City Zip Code State Transaction ID: SA11AI.9177 AL Huntsville 35806 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) CEO INDIVIDUAL CONTRIBUTION **HEMSI** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Johnson, James S., , , Date of Receipt Mailing Address 1801 Mockingbird Lane 2019 City State Zip Code Transaction ID: SA11AI.9175 OK Enid 73703 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Life EMS INDIVIDUAL CONTRIBUTION President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kelley, Ken, , , Date of Receipt Mailing Address 130 Blackgum St 13 2019 City State Zip Code Transaction ID: SA11AI.9176 AR Magnolia 71753 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION ProMed Ambulance CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Montes, Asbel, , , Date of Receipt Mailing Address 305 Rue Bordeaux 2019 City Zip Code State Transaction ID: SA11AI.9162 LA Carencro 70520 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION **Acadian Companies** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Montes, Asbel, , , Date of Receipt Mailing Address 305 Rue Bordeaux 2019 City State Zip Code Transaction ID: SA11AI.9167 LA Carencro 70520 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Acadian Companies** INDIVIDUAL CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Montes, Asbel, , , Date of Receipt Mailing Address 305 Rue Bordeaux 13 2019 City State Zip Code Transaction ID: SA11AI.9181 Carencro LA 70520 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION Acadian Companies Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s)

FOR LINE NUMBER:					PAGE	 12	OF	15	
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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Reinert, Aaron, , , Date of Receipt Mailing Address 29251 Potassium St NW 2019 City Zip Code State Transaction ID: SA11AI.9174 MN Isanti 55040 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION Lake Regions EMS Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Strozyk, Randy, , , Date of Receipt Mailing Address 9209 181 Street Avenue East 2019 City State Zip Code Transaction ID: SA11AI.9165 Bonney Lake WA 98390 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Medical Response INDIVIDUAL CONTRIBUTION Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 800.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Strozyk, Randy, , , Date of Receipt Mailing Address 9209 181 Street Avenue East 09 2019 City State Zip Code Transaction ID: SA11AI.9170 WA Bonney Lake 98390 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INDIVIDUAL CONTRIBUTION American Medical Response Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

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

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NAME OF COMMITTEE (in Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Strozyk, Randy, Mailing Address 9209 181 Street Avenue East City Strate Wa 98390 FEC ID number of contributing Wa 98390 FEC ID number of contributing C		y information copied from such Reports and St for commercial purposes, other than using the							
A. Strozyk, Randy, , . Mailing Address 9209 181 Street Avenue East City			OCIATIO	N FEDERAL PAC (AK	A AMBU-PAC)				
City Bonney Lake Bocopit his Period Botte of Receipt Botte of Receipt His Period Botte of Receipt Library Bonney Lake Bonney	Α.	Strozyk, Randy, , ,	Date of Receipt						
Bonney Lake WA 98390 FEC ID number of contributing federal political committee. Name of Employer (for Individual) American Medical Response Receipt Fc: Primary General Other (specify) ▼ 1200.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WierSch, Larry, , , Maing Address 4846 Five Point Road City New Tripoli PA 18066 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Cetronia Ambulance C. Aggregate Year-to-Date ▼ 18066 FEC ID number of contributing of their (specify) ▼ 18060 FEC ID number of contributing of their (specify) ▼ 18060 FEC ID number of contributing federal political committee. C. Mailing Address City State Zip Code Primary General Other (specify) ▼ 500,00 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ctronia Ambulance C. Mailing Address City State Zip Code FEC ID number of contributing federal political committee. Name of Employer (for Individual) City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) City State Zip Code Amount of Each Receipt this Period Memo Item INDIVIDUAL CONTRIBUTION Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Period Memo Item INDIVIDUAL CONTRIBUTION Amount of Each Receipt this Period Memo Item INDIVIDUAL CONTRIBUTION Amount of Each Receipt this Period Memo Item INDIVIDUAL CONTRIBUTION Amount of Each Receipt this Period Memo Item INDIVIDUAL CONTRIBUTION		Mailing Address 9209 181 Street Avenue East							
FEC ID number of contributing federal political committee. Name of Employer (for Individual) American Medical Response Receipt For: Primary General Primary General Primary General Primary General Other (speelty) ▼ State Zip Code Primary General Other (speelty) ▼ State Zip Code Primary General Other (speelty) ▼ State Zip Code Other (speelty) ▼ Stat		•		'	Transaction ID : SA11AI.9184				
Name of Employer (for Individual)		Bonney Lake	WA	98390	Amount of Each Receipt this Period				
American Medical Response Receipt For: Primary General Other (specify) ▼ Date of Receipt		· · · · · · · · · · · · · · · · · · ·	С						
Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ 1200.00		Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item				
Primary General Other (specify) ▼ 1200.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wiersch, Larry, , , Mailing Address 4846 Five Point Road City State Zip Code PA 18066 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Occupation (for Individual) Administrator Receipt For: Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: SA11AL9179 Memo Item NDIVIDUAL CONTRIBUTION Primary General Other (specify) ▼ State Zip Code Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C. Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Aggregate Year-to-Date ▼ Memo Item Subtrotal of Receipts This Page (optional)		American Medical Response	Vice	President	INDIVIDUAL CONTRIBUTION				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wiersch, Larry, , , Mailing Address 4846 Five Point Road City New Tripoli PA 18066 FEC ID number of contributing federal political committee. Name of Employer (for Individual) Cetronia Ambulance Receipt For: Primary General Other (specify) ▼ Address City State Zip Code PA 18066 C 250.00 Memo Item INDIVIDUAL CONTRIBUTION Date of Receipt this Period FEC ID number of Individual (Last, First, Middle Initial) or Full Organization Name C. Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Primary General Other (specify) Subtotal of Receipts This Page (optional)		Primary General	Aggregate Y	1200.00					
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Name of Employer (for Individual) Cetronia Ambulance Receipt For: Date of Receipt This Page (optional) Name of Employer (for Individual) Cetronia Ambulance Administrator Name of Employer (for Individual) Administrator Name of Employer (for Individual) Name of Empl		New Tripoli	PA	18066	Amount of Each Receipt this Period				
Cetronia Ambulance Receipt For: Primary General Administrator Administrator INDIVIDUAL CONTRIBUTION Primary General Aggregate Year-to-Date Soo.oo Individual (Last, First, Middle Initial) or Full Organization Name C. Mailing Address Date of Receipt M M M / D D / YYYYYY		· · · · · · · · · · · · · · · · · · ·	250.00						
Primary General Other (specify) ▼ 500,00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Subtotal of Receipts This Page (optional)				,					
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Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)		Name of Employer (for Individual)	pation (for Individual)	Memo Item					
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		R LINE NUMBER: PAGE 14 OF 15				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOC	IATION FEDERAL F	PAC (AKA	AMBU-PAC)				
Full Name (Last, First, Middle Initial) A. DEBBIE DINGELL FOR CONGRES A. DEBBIE DINGELL FOR CONGRES	Date of Disbursement						
Mailing Address 19855 W. OUTER DR. SUITE 103 A-E	05 30 2019						
DEARBORN	State Zip Code MI 48124		FEC Identification Number				
Purpose of Disbursement CONTRIBUTION TO POLITICAL COMMITTEE Candidate Name		011	Transaction ID : SB23.9150 Amount of Each Disbursement this Period				
DINGELL, DEBBIE, , , Office Sought: x House Disbursem	nent For: 2020	Category/ Type	1000.00				
	Primary General Other (specify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial) KURT SCHRADER FOR CONGRESS						
,	State Zip Code OR 97045		FEC Identification Number				
Purpose of Disbursement CONTRIBUTION TO POLITICAL COMMITTEE	Purpose of Disbursement						
Candidate Name SCHRADER, KURT, , ,		Category/ Type	Transaction ID: SB23.9160 Amount of Each Disbursement this Period				
Senate X	nent For: 2020 Primary General Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial) C. LEAHY FOR U.S. SENATOR COM	Date of Disbursement						
Mailing Address PO BOX 1042		06 13 2019					
MONTPELIER	State Zip Code VT 05601		FEC Identification Number				
Purpose of Disbursement CONTRIBUTION TO POLITICAL COMMITTEE Candidate Name LEAHY, PATRICK J, , ,	011 Category/ Type	C C00068353 Transaction ID : SB23.9154 Amount of Each Disbursement this Period					
Office Sought: House Disbursem	nent For: 2022 Primary 🗶 General Other (specify) 🔻		2500.00 Memo Item				
State: VT District: 00							
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			4500.00				

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 x 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOC						
Full Name (Last, First, Middle Initial) A. MULLIN FOR CONGRESS	Date of Disbursement					
Mailing Address PO BOX 3681			04 15 2019			
City MUSKOGEE Purpose of Disbursement	State Zip Code OK 74402		FEC Identification Number			
CONTRIBUTION TO POLITICAL COMMITTEE Candidate Name		011	Transaction ID : SB23.9144 Amount of Each Disbursement this Period			
MULLIN, MARKWAYNE MR., , , Office Sought: House Disbursen	nent For: 2020	Category/ Type	2000.00			
Senate x President	Primary General Other (specify) ▼		Memo Item			
State: OK District: 02 Full Name (Last, First, Middle Initial)						
B. PALLONE FOR CONGRESS	Date of Disbursement					
Mailing Address PO BOX 3176	05 30 2019					
City LONG BRANCH Purpose of Disbursement						
CONTRIBUTION TO POLITICAL COMMITTEE Candidate Name	011 Category/	C C00226928 Transaction ID : SB23.9158 Amount of Each Disbursement this Period				
	nent For: 2020	Туре	1500.00			
	Primary General Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial) C. RICHARD E NEAL FOR CONGRE	Date of Disbursement					
Mailing Address 76 MAGNOLIA TERRACE	05 30 7 9 9 9					
City SPRINGFIELD	State Zip Code MA 01108		FEC Identification Number			
Purpose of Disbursement CONTRIBUTION TO POLITICAL COMMITTEE	C H8MA02041 Transaction ID : SB23.9153					
Candidate Name NEAL, RICHARD E, , ,	NEAL, RICHARD E, , , Type					
Office Sought: March House Disbursen		1500.00				
State: MA District: 02	Other (specify) ▼		Memo Item			
SUBTOTAL of Disbursements This Page (optional)			5000.00			
TOTAL This Period (last page this line number only)			9500.00			