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JAN 30 11 28 AM '98

AMPAC AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

1101 Vermont Ave., N.W.
Washington, DC 20005
Telephone 202 789-7400
Fax 202 789-7469

BOARD

James G. White, MD
Ormond Beach, Florida
Chairman

Robert M. Begin, MD
West Chester, Pennsylvania
Secretary

R. William Alexander, MD
Reading, Pennsylvania

James B. Fuller, MD, JD
Jackson, Mississippi

Charles L. Garrett, MD
Jacksonville, North Carolina

Robert E. Hertzka, MD
San Diego, California

Candance E. Keller, MD, MPH
Hattiesburg, Mississippi

Grant C. Lynde
Pittsburgh, Pennsylvania

Gordon A. Marshall
Dayton, Ohio

Krishna K. Sawhney, MD
Taylor, Michigan

Roy W. Vandiver, MD
Decatur, Georgia

Wilfred E. Wilkins, MD
Nampa, Idaho

STAFF

Kevin Walker
Executive Director
and Treasurer

January 28, 1998

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

Identification Number: C 00000 422

Gentlemen:

Enclosed is our twelfth Report of Receipts and Expenditures covering the period between December 1, 1997 and December 31, 1997. This filing is in accordance with the Federal Election Campaign Act of 1971 (P.O. 92-255) as amended.

We request your advice as to the form and adequacy of this report.

Sincerely,

Kevin Walker
Executive Director
and Treasurer

Enclosures

Schedule A, Line 11 (8 pages)
Schedule A, Line 17 (1 page)
Schedule B, Line 21 (1 pages)
Schedule B, Line 23 (2 pages)
Schedule D, Line 10 (1 page)

cc: AL, AZ, CA, CT, FL, GA, IA, IL, KS, ME, MI, MN, MO, NM, NY, PA, TX, VA

AMPAC is a separate segregated fund established by the AMA. Voluntary political contributions by individuals to AMPAC should be written on personal checks. Funds from corporations cannot be used for contributions and expenditures in Federal elections. Corporate checks will be placed in a separate AMA account for political education and other non-election activities. Contributions are not limited to the suggested amount. Neither AMA nor its constituent state associations will favor or disadvantage anyone based upon the amounts or failure to make PAC contributions. Voluntary political contributions are subject to guidelines of FEC regulations Section 110.1, 110.2 & of 110.5 (Federal regulations require this notice)

Contributions to AMPAC are not deductible as charitable contributions for federal income tax purposes.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full)
AMERICAN MEDICAL ASSOCIATION
POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
1101 VERMONT AVENUE, N.W.

CITY, STATE and ZIP CODE
WASHINGTON, D.C. 20005

2. FEC IDENTIFICATION NUMBER
JAN 30 11 24 AM '98
C 00000 422

3. ☐ This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☒ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 12/1/97 through 12/31/97		
6. (a) Cash on Hand January 1, 19 97		$ 1,039,826.65
(b) Cash on Hand at Beginning of Reporting Period	$ 2,397,325.33	
(c) Total Receipts (from Line 19)	$ 194,909.03	$ 2,256,220.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 2,592,234.36	$ 3,296,047.37
7. Total Disbursements (from Line 30)	$ 35,421.13	$ 739,234.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2,556,813.23	$ 2,556,813.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 5,000.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

Type or Print Name of Treasurer
Kevin Walker

Signature of Treasurer
KWalker

Date
1/28/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 1/1/91)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 12/1/97 TO: 12/31/97

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	149,967.50	1,857,432.78
ii. Unitemized	32,886.20	250,503.94
iii. Total (add i and ii) ➤	182,853.70	2,107,936.72
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	182,853.70	2,107,936.72
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		498.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, interest, etc.)	12,055.33	147,785.50
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	194,909.03	2,256,220.72
20. Total Federal Receipts (subtract line 18 from line 19) ➤	194,909.03	2,256,220.72
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	13,921.13	146,498.64
c. Total Operating Expenditures (Add a i, a ii, and b)) ➤	13,921.13	146,498.64
22. Transfers to Affiliated/Other Party Committees		128,890.50
23. Contributions to Federal Candidates/Committees and Other Political Committees	21,500.00	462,350.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		1,495.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		1,495.00
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	35,421.13	739,234.14
31 Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	35,421.13	739,234.14
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	182,853.70	2,107,936.72
33. Total Contribution Refunds (from line 28d)		1,495.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	182,853.70	2,106,441.72
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	13,921.13	146,498.64
36. Offsets to Operating Expenditures (from line 15)		498.50
37. Net Operating Expenditures (subtract line 36 from 35) ➤	13,921.13	146,000.14

SCHEDULE A ITEMIZED RECEIPTS

LINE NO. 11

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 MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
ALABAMA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 6008 MONTGOMERY AL 36106	Occupation:	12/03/97	
Receipt for:	Aggregate:		2,550.00

b. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
ARIZONA MEDICAL POLITICAL ACTION COMMITTEE 810 W. BETHANY HOME ROAD PHOENIX AZ 85013	Occupation:	12/03/97	
Receipt for:	Aggregate:		1,460.00

c. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
KENTUCKY EDUCATION MEDICAL POLITICAL ACTION COMMITTEE 4965 US HIGHWAY 42 LOUISVILLE KY 40222	Occupation:	12/03/97	
Receipt for:	Aggregate:		14,875.00

d. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
MAIN MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 190 MANCHESTER ME 04351	Occupation:	12/03/97	
Receipt for:	Aggregate:		370.00

e. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
MAIN MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 190 MANCHESTER ME 04351	Occupation:	12/03/97	
Receipt for:	Aggregate:		1,300.00

f. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
MISSOURI MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 1402 JEFFERSON CITY MO 65102	Occupation:	12/03/97	
Receipt for:	Aggregate:		1,450.00

SUBTOTAL OF RECEIPTS THIS PAGE..... 22,005.00

TOTAL THIS PERIOD.....

SCHEDULE A ITEMIZED RECEIPTS

LINE NO. 11

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
SOUTH CAROLINA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 11188 COLUMBIA SC 29211	Occupation:	12/03/97	
Receipt for:	Aggregate:		3,600.00

b. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
INDEPENDENT MEDICINE'S POLITICAL ACTION COMMITTEE P.O. BOX 120909 NASHVILLE TN 37212	Occupation:	12/08/97	
Receipt for:	Aggregate:		850.00

c. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
IOWA MEDICAL POLITICAL ACTION COMMITTEE 1001 GRAND AVENUE W. DES MOINES IA 50265	Occupation:	12/08/97	
Receipt for:	Aggregate:		300.00

d. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
IOWA MEDICAL POLITICAL ACTION COMMITTEE 1001 GRAND AVENUE W. DES MOINES IA 50265	Occupation:	12/08/97	
Receipt for:	Aggregate:		2,850.00

e. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
KANSAS MEDICAL POLITICAL ACTION COMMITTEE 623 SW 10TH TOPEKA KS 66612	Occupation:	12/08/97	
Receipt for:	Aggregate:		2,890.00

f. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
MISSOURI MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 1402 JEFFERSON CITY MO 65102	Occupation:	12/08/97	
Receipt for:	Aggregate:		350.00

SUBTOTAL OF RECEIPTS THIS PAGE..... 10,840.00

TOTAL THIS PERIOD.....

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
OKLAHOMA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 54520 OKLAHOMA CITY OK 73154	Occupation:	12/08/97	
Receipt for:	Aggregate:		1,200.00

b. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
SOUTH DAKOTA MEDICAL POLITICAL ACTION COMMITTEE 1323 S. MINNESOTA AVENUE SIOUX FALLS SD 57105	Occupation:	12/08/97	
Receipt for:	Aggregate:		250.00

c. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
ALABAMA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 1900 MONTGOMERY AL 36102	Occupation:	12/09/97	
Receipt for:	Aggregate:		2,100.00

d. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
MONTANA MEDICAL POLITICAL ACTION COMMITTEE 2021 11TH AVENUE HELENA MT 59601	Occupation:	12/09/97	
Receipt for:	Aggregate:		250.00

e. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
PENNSYLVANIA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 8820 HARRISBURG PA 17105	Occupation:	12/09/97	
Receipt for:	Aggregate:		12,510.00

f. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
WISCONSIN MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 1109 MADISON WI 53701	Occupation:	12/09/97	
Receipt for:	Aggregate:		550.00

SUBTOTAL OF RECEIPTS THIS PAGE..... 16,860.00

TOTAL THIS PERIOD.....

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
a. NEW JERSEY MEDICAL POLITICAL ACTION COMMITTEE, TWO PRINCESS ROAD, LAWRENCEVILLE NJ 08648	Occupation:	12/11/97	
Receipt for:	Aggregate:		400.00
b. CONNECTICUT MEDICAL POLITICAL ACTION COMMITTEE, P.O. BOX 266, MIDDLEFIELD CT 06455	Occupation:	12/15/97	
Receipt for:	Aggregate:		3,000.00
c. CONNECTICUT MEDICAL POLITICAL ACTION COMMITTEE, P.O. BOX 266, MIDDLEFIELD CT 06455	Occupation:	12/15/97	
Receipt for:	Aggregate:		4,520.00
d. IOWA MEDICAL POLITICAL ACTION COMMITTEE, 1001 GRAND AVENUE, W. DES MOINES IA 50265	Occupation:	12/15/97	
Receipt for:	Aggregate:		1,850.00
e. SOUTH CAROLINA MEDICAL POLITICAL ACTION COMMITTEE, P.O. BOX 11188, COLUMBIA SC 29211	Occupation:	12/15/97	
Receipt for:	Aggregate:		1,800.00
f. WASHINGTON MEDICAL POLITICAL ACTION COMMITTEE, 2033 6TH AVENUE, SEATTLE WA 98121	Occupation:	12/15/97	
Receipt for:	Aggregate:		1,270.00

SUBTOTAL OF RECEIPTS THIS PAGE..... 12,840.00

TOTAL THIS PERIOD.....

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
ALABAMA MEDICAL POLITICAL ACTION COMMITTEE 19 SOUTH JACKSON STREET MONTGOMERY AL 36104		12/16/97	
Receipt for:	Aggregate:		1,600.00

b. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
ARIZONA MEDICAL POLITICAL ACTION COMMITTEE 810 W. BETHANY HOME ROAD PHOENIX AZ 85013		12/16/97	
Receipt for:	Aggregate:		880.00

c. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
LOUISIANA MEDICAL POLITICAL ACTION COMMITTEE 543 SPANISH TOWN ROAD BATON ROUGE LA 70802		12/16/97	
Receipt for:	Aggregate:		1,300.00

d. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
LOUISIANA MEDICAL POLITICAL ACTION COMMITTEE 543 SPANOS TOWN ROAD BATON ROUGE LA 70802		12/16/97	
Receipt for:	Aggregate:		1,150.00

e. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
MEDICAL SOCIETY OF THE STATE OF NEW YORK PAC 420 LAKEVILLE ROAD LAKE SUCCESS NY 11042		12/16/97	
Receipt for:	Aggregate:		6,155.00

f. Name and Address	Name of employer / Occupation	Date	Amount of Each Receipt for Period
MINNESOTA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 18855 MINNEAPOLIS MN 55418		12/16/97	
Receipt for:	Aggregate:		270.00

SUBTOTAL OF RECEIPTS THIS PAGE..... 11,355.00

TOTAL THIS PERIOD.....

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
MINNESOTA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 18655 MINNEAPOLIS MN 55418	Occupation:	12/16/97	
Receipt for:	Aggregate:		820.00

b. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
NORTH CAROLINA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 25834 RALEIGH NC 27611	Occupation:	12/16/97	
Receipt for:	Aggregate:		8,345.00

c. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
OHIO MEDICAL POLITICAL ACTION COMMITTEE 1500 LAKE SHORE DRIVE COLUMBUS OH 43204	Occupation:	12/16/97	
Receipt for:	Aggregate:		4,625.00

d. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
ALABAMA MEDICAL POLITICAL ACTION COMMITTEE 19 SOUTH JACKSON STREET MONTGOMERY AL 36104	Occupation:	12/19/97	
Receipt for:	Aggregate:		1,450.00

e. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
FLORIDA MEDICAL POLITICAL ACTION COMMITTEE P.O. BOX 10269 TALLAHASSEE FL 32302	Occupation:	12/19/97	
Receipt for:	Aggregate:		1,025.00

f. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
GEORGIA MEDICAL POLITICAL ACTION COMMITTEE 938 PEACHTREE STREET NE ATLANTA GA 30309	Occupation:	12/19/97	
Receipt for:	Aggregate:		7,850.00

SUBTOTAL OF RECEIPTS THIS PAGE..... 24,115.00

TOTAL THIS PERIOD.....

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
MARYLAND MEDICAL POLITICAL ACTION COMMITTEE 1211 CATHEDRAL STREET BALTIMORE MD 21201	Occupation:	12/19/97	
Receipt for:	Aggregate:		2,317.50

b. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
MICHIGAN DOCTOR'S POLITICAL ACTION COMMITTEE P.O. BOX 769 EAST LANSING MI 48823	Occupation:	12/19/97	
Receipt for:	Aggregate:		950.00

c. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
OREGON MEDICAL POLITICAL ACTION COMMITTEE 5210 SW CORBETT STREET PORTLAND OR 97201	Occupation:	12/19/97	
Receipt for:	Aggregate:		2,620.00

d. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
TEXAS MEDICAL POLITICAL ACTION COMMITTEE 401 WEST 15TH STREET AUSTIN TX 78701	Occupation:	12/19/97	
Receipt for:	Aggregate:		45,265.00

e. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

f. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

SUBTOTAL OF RECEIPTS THIS PAGE..... 51,152.50

TOTAL THIS PERIOD.....

SCHEDULE A ITEMIZED RECEIPTS

LINE NO. 11

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
JENNIFER THURSTON W145 N7580 NORTHWOOD DRIVE MENOMONEE FALLS WI 53051	Occupation: Housewife	12/08/97	
Receipt for:	Aggregate:	200.00	200.00

b. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
KUMUDHINI FERNANDO, MD 46 GROUSE LANE WOODBRIDGE CT 06525	Occupation: Self-Employed Physician	12/08/97	
Receipt for:	Aggregate:	200.00	200.00

c. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
MARY YODER 1704 EDWARD Y JUANITA CT ALBUQUERQUE NM 87107	Occupation: Housewife	12/15/97	
Receipt for:	Aggregate:	400.00	400.00

d. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

e. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

f. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

SUBTOTAL OF RECEIPTS THIS PAGE..... 800.00

TOTAL THIS PERIOD..... 149,967.50

SCHEDULE A ITEMIZED RECEIPTS

LINE NO. 17

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
RIGGS INVESTMENT MANAGEMENT COMPANY P.O. BOX 96211 WASHINGTON DC 20090	Occupation:	12/31/97	
Receipt for: INTEREST	Aggregate:		12,055.33

b. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

c. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

d. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

e. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

f. Name and Address	Name of employer	Date	Amount of Each Receipt for Period
	Occupation:		
Receipt for:	Aggregate:		

SUBTOTAL OF RECEIPTS THIS PAGE..... 12,055.33

TOTAL THIS PERIOD..... 12,055.33

SCHEDULE B ITEMIZED DISBURSEMENTS

LINE NO. 21

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

	Purpose of Disb.	Date	Amount of Each Disbursement This Period
a. Name and Address LAKE, SOSIN, SNELL, PENY AND ASSOCIATES 1730 RHODE ISLAND AVENUE WASHINGTON DC 20036	POLL EXPENSES Disbursement for:	12/17/97	7,200.00
b. Name and Address D.C. TREASURER UNINCORPORATED ESTIMATED T P.O. BOX 96020 WASHINGTON DC 20090	Purpose of Disb. ESTIMATED TAXES Disbursement for:	12/17/97	1,750.00
c. Name and Address RIGGS BANK P.O. BOX 1912 WASHINGTON DC 20074	Purpose of Disb. BANK CHARGES Disbursement for:	12/31/97	81.00
d. Name and Address RIGGS INVESTMENT MANAGEMENT COMPANY P.O. BOX 96211 WASHINGTON DC 20090	Purpose of Disb. ACCRUED INTEREST Disbursement for:	12/31/97	3,471.59
e. Name and Address RIGGS INVESTMENT MANAGEMENT COMPANY P.O. BOX 96211 WASHINGTON DC 20090	Purpose of Disb. BANK CHARGES Disbursement for:	12/31/97	291.98
f. Name and Address RIGGS INVESTMENT MANAGEMENT COMPANY P.O. BOX 96211 WASHINGTON DC 20090	Purpose of Disb. LOSS ON INVESTMENTS Disbursement for:	12/31/97	1,146.56
g. Name and Address	Purpose of Disb. Disbursement for:	Date	Amount of Each Disbursement This Period
h. Name and Address	Purpose of Disb. Disbursement for:	Date	Amount of Each Disbursement This Period

SUBTOTAL OF DISBURSEMENTS THIS PAGE..... 13,921.13

TOTAL THIS PERIOD..... 13,921.13

SCHEDULE B ITEMIZED DISBURSEMENTS

LINE NO. 23

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 MEDICAL POLITICAL ACTION COMMITTEE

a. Name and Address	Purpose of Disb.	Date	Amount of Each Disbursement This Period
FRIENDS OF BUD CRAMER 223 EAST SIDE SQUARE HUNTSVILLE AL 35801	1998 PRIMARY Disbursement for:	12/16/97	1,000.00
b. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
JOHN SHADEGG FOR CONGRESS P.O. BOX 45444 PHOENIX AZ 85064	1998 PRIMARY Disbursement for:	12/16/97	2,000.00
c. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
ROGAN FOR CONGRESS COMMITTEE P.O. BOX 36 MONTROSE CA 91021	1998 PRIMARY Disbursement for:	12/16/97	2,500.00
d. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
NORWOOD FOR CONGRESS P.O. BOX 499 EVANS GA 30809	1998 PRIMARY Disbursement for:	12/16/97	2,500.00
e. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
FRIENDS OF ROY BLUNT P.O. BOX 278 STRAFFORD MO 65757	1998 PRIMARY Disbursement for:	12/16/97	1,000.00
f. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
BILL REDMOND FOR CONGRESS P.O. BOX 10193 SANTA FE NM 87504	1998 PRIMARY Disbursement for:	12/16/97	1,000.00
g. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
PAXON FOR CONGRESS 3 CAMBRIDGE PLACE ROCHESTER NY 14534	1998 PRIMARY Disbursement for:	12/16/97	500.00
h. Name and Address	**Purpose of Disb.**	**Date**	**Amount of Each Disbursement This Period**
THOMAS J. BLILEY FOR CONGRESS COMMITTEE P.O. BOX 17095 RICHMOND VA 23226	1998 PRIMARY Disbursement for:	12/16/97	750.00

SUBTOTAL OF DISBURSEMENTS THIS PAGE..... 11,250.00

TOTAL THIS PERIOD.....

SCHEDULE B ITEMIZED DISBURSEMENTS

LINE NO. 23

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

Name and Address	Purpose of Disb.	Date	Amount of Each Disbursement This Period
a. SAM BROWNBACK FOR CONGRESS P.O. BOX 2008 TOPEKA KS 66601	1998 PRIMARY Disbursement for:	12/16/97	2,000.00
b. FRIENDS OF DAVE WELDON P.O. BOX 968 MELBOURNE FL 32902	1998 PRIMARY Disbursement for:	12/19/97	500.00
c. MCKIBBEN TO CONGRESS 98 P.O. BOX 308 MARSHALLTOWN IA 50158	1998 PRIMARY Disbursement for:	12/19/97	2,000.00
d. STABENOW FOR CONGRESS P.O. BOX 4945 E. LANSING MI 48826	1998 PRIMARY Disbursement for:	12/19/97	1,000.00
e. GUTKNECHT FOR U.S. CONGRESS COMMITTEE P.O. BOX 6428 ROCHESTER MN 55903	1998 PRIMARY Disbursement for:	12/19/97	1,000.00
f. MINGE FOR CONGRESS 360 10TH AVENUE GRANITE FALLS MN 56241	1998 PRIMARY Disbursement for:	12/19/97	1,000.00
g. LAZIO FOR CONGRESS 70 BAYWAY AVENUE BRIGHTWATERS NY 11718	1998 PRIMARY Disbursement for:	12/19/97	1,000.00
h. KAY GRANGER FOR CONGRESS 910 HOUSTON STREET FORT WORTH TX 76102	1998 PRIMARY Disbursement for:	12/19/97	1,000.00

SUBTOTAL OF DISBURSEMENTS THIS PAGE..... 9,500.00

TOTAL THIS PERIOD.....

SCHEDULE B ITEMIZED DISBURSEMENTS

LINE NO. 23

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Name of Committee (in Full)
AMERICAN MEDICAL POLITICAL ACTION COMMITTEE

Name and Address	Purpose of Disb.	Date	Amount of Each Disbursement This Period
a. GOODE FOR CONGRESS 124 ORCHARD AVENUE ROCKY MOUNT VA 24151	1998 PRIMARY Disbursement for:	12/19/97	1,000.00
b. MALONEY FOR CONGRESS 301 MAIN STREET DENBURY CT 06810	1998 PRIMARY Disbursement for:	12/23/97	2,000.00
c. TEAM EMERSON P.O. BOX 822 CAPE GIRARDEAU MO 63701	1998 PRIMARY Disbursement for:	12/23/97	2,500.00
d. BALDACCI FOR CONGRESS COMMITTEE P.O. BOX 823 BANGOR ME 04402	1998 PRIMARY Disbursement for:	12/23/97	2,500.00
e. BOB SHUSTER FOR CONGRESS P.O. BOX 329 ALTOONA PA 16603	VOID CHK. 13999, DATED 11/12/97 Disbursement for:	12/31/97	-500.00
f. CANADY FOR CONGRESS COMMITTEE P.O. BOX 6158 LAKELAND FL 33807	VOID CHK. 13881, DATED 9/8/97 Disbursement for:	12/31/97	-4,500.00
g. GOODE FOR CONGRESS 124 ORCHARD AVENUE ROCKY MOUNT VA 24151	VOID CHK. 13920, DATED 9/29/97 Disbursement for:	12/31/97	-1,000.00
h. HASTERT FOR CONGRESS COMMITTEE 25 E. WILSON BATAVIA IL 60510	VOID CHK. 13940, DATED 10/10/97 Disbursement for:	12/31/97	-1,250.00

SUBTOTAL OF DISBURSEMENTS THIS PAGE..... 750.00

TOTAL THIS PERIOD..... 21,500.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full) AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor LAKE, SOSIN, SNELL, PERRY AND ASSOCIATES 1730 RHODE ISLAND AVENUE, NW WASHINGTON, D.C. 20036	.00	12,200	7,200	5,000
Nature of Debt (Purpose): POLL EXPENSES (HENRY-KY)				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				5,000
2) TOTAL This Period (last page this line only)				5,000
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				5,000

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was recived.

☒	Hand Delivered	Date of Receipt 1-30-98
☐	First Class Mail	POSTMARKED
☐	Registerd/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	
MVD		1-30-98
PREPARER		DATE PREPARED

(7/97)