REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Oct 18 4 25 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
American Hospital Association PAC

ADDRESS (number and street) ☐ Check if different than previously reported
325 - 7th Street, NW

CITY, STATE and ZIP CODE
Washington, DC 20001

2. FEC IDENTIFICATION NUMBER
C00106146

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

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 9/1/96 through 9/30/96		
6. (a) Cash on Hand January 1, 19 96		$ 342,656.02
(b) Cash on Hand at Beginning of Reporting Period	$ 328,404.55	
(c) Total Receipts (from Line 19)	$ 39,224.12	$ 357,352.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 367,628.67	$ 700,008.74
7. Total Disbursements (from Line 30)	$ 138,489.14	$ 470,869.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 229,139.53	$ 229,139.53
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ - 0 -	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 13,000.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Al Jackson

Signature of Treasurer
[signature]

Date
10/17/96

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 9/93)

FE6AN009

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

(revised 1/1/91)

NAME OF COMMITTEE: American Hospital Association PAC

REPORT COVERING PERIOD FROM 9/1/96 TO: 9/30/96

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees	5,960.00	52,084.59	11(a)(i)
i. Itemized (use Schedule A)	21,521.36	192,724.02	11(a)(ii)
ii. Unitemized	27,481.36	244,808.61	11(a)(iii)
iii. Total (add i and ii) ➤	- 0 -	- 0 -	11(b)
b. Political Party Committees	- 0 -	2,000.00	11(c)
c. Other Political Committees (such as PACs)	27,481.36	246,808.61	11(d)
d. Total Contributions (add a iii, b and c) ➤	10,625.00	102,855.00	12
12. Transfers From Affiliated/Other Party Committees	- 0 -	- 0 -	13
13. All Loans Received	- 0 -	- 0 -	14
14. Loan Repayments Received	- 0 -	- 0 -	15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	375.00	2,175.00	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	742.76	5,514.11	17
17. Other Federal Receipts (Dividends, Interest, etc.)	- 0 -	- 0 -	18
18. Transfers from Nonfederal Account for Joint Activity	39,224.12	357,352.72	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	39,224.12	357,352.72	20
20. Total Federal Receipts (subtract line 18 from line 19) ➤			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)	- 0 -	- 0 -	21(a)(i)
i. Federal Share	- 0 -	- 0 -	21(a)(ii)
ii. Non-Federal Share	13,014.14	69,673.03	21(b)
b. Other Federal Operating Expenditures	13,014.14	69,673.03	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	- 0 -	- 0 -	22
22. Transfers to Affiliated/Other Party Committees	125,475.00	400,961.18	23
23. Contributions to Federal Candidates/Committees and Other Political Committees	- 0 -	- 0 -	24
24. Independent Expenditures (use Schedule E)	- 0 -	- 0 -	25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	- 0 -	- 0 -	26
26. Loan Repayments Made	- 0 -	- 0 -	27
27. Loans Made	- 0 -	- 0 -	28(a)
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	- 0 -	- 0 -	28(b)
b. Political Party Committees	- 0 -	- 0 -	28(c)
c. Other Political Committees (such as PACs)	- 0 -	- 0 -	28(d)
d. Total Contribution Refunds (add a, b and c) ➤	- 0 -	235.00	29
29. Other Disbursements	138,489.14	470,869.21	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	138,489.14	470,869.21	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	27,481.36	246,808.61	32
33. Total Contribution Refunds (from line 28d)	- 0 -	- 0 -	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	27,481.36	246,808.61	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	13,014.14	69,673.03	35
36. Offsets to Operating Expenditures (from line 15)	- 0 -	- 0 -	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	13,014.14	69,673.03	37

FE6AN093

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for LINE NUMBER(s) _____
(Use additional schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
American Hospital Association PAC				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The Cramer Group 136 11th Street, SE Washington, DC 20003	13,000 *Disputed Debt. See 6/20/96 report disclosure.	0	0	13,000 for original
Nature of Debt (Purpose): Polling Services				
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)	
2) TOTALS This Period (last page in this line only)	13,000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	13,000.00

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

FOR LINE NUMBER 11 a I

SCHEDULE A ITEMIZED RECEIPTS

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 Hospital Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
A. Gregory Vigdor, 300 Elliott Avenue, Ste. 300, Seattle, WA 98119-4118	Washington Health Foundation / President	09/04/96	250.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 250.00		
B. William H. Anderson, South Florida Baptist Hospital, P.O. Drawer H, Plant City, FL 33566	South Florida Baptist Hospital / Administrator/CEO	09/04/96	400.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 400.00		
C. Dallas Carroll, 1560 N. Sandburg Terr. No. 3501, Chicago, IL 60610-1435	American Hospital Association / Regional Executive	09/04/96	1,000.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,000.00		
D. Phillip Dutcher, 2 Old Fence Rd., Palm Beach Gardens, FL 33418	Intracoastal Health Systems / Sr. VP—Operations	09/15/96	280.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 280.00		
E. Joseph A. Thompson, 4190 Belfort Road, #425, Jacksonville, FL 32216	DeLay-Thompson / Consultant	09/15/96	400.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 400.00		
F. William A. Bell, Florida Hospital Association, P.O. Box 469, Tallahassee, FL 32302	Florida Hospital Association / Sr. VP/General Counsel	09/15/96	200.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 680.00		
G. Kelly D'Annolfo, 930 SW 98th Terrace, Pembroke Pines, FL 33025	Honeywell, Inc. / Healthcare Account Exec.	09/15/96	400.00
Receipt For: Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 400.00		

SUB TOTAL of Receipts This Page (Optional) > 2,930.00

TOTAL this Period (Last page this line number only) >

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

FOR LINE NUMBER 11 a i

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Patrick J. Madden 1309 Soundview Trail Gulf Breeze, FL 32561 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Sacred Heart Health System President/CEO Aggregate Year-to-date > $ 400.00	09/15/96	400.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Clark P. Christianson Memorial Health Systems 3 Carmel Court Ormond Beach, FL 32174 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Memorial Health Systems Administrator Aggregate Year-to-date > $ 220.00	09/15/96	220.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Duncan Moore 2179 Miller Landing Rd. Tallahassee, FL 32312 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Tallahassee Memorial Regional Med. Ctr. President/CEO Aggregate Year-to-date > $ 400.00	09/15/96	400.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
John Hillenmeyer 962 Innswood Ct. Longwood, FL 32779 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Orlando Regional Healthcare System Health Care Exec. Aggregate Year-to-date > $ 240.00	09/15/96	160.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Peter Bernard 1008 Dorie Circle Louisville, KY 40205 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Caritas Medical Center CEO Aggregate Year-to-date > $ 350.00	09/19/96	350.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Christina B. Gunn UNM Children's Psychiatric Hos 1001 Yale Blvd., NE Albuquerque, NM 87131 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	UNM Children's Psychiatric Hospital CEO Aggregate Year-to-date > $ 250.00	09/25/96	250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Gary Rosenberg Mt. Sinai Medical Center One Gustave Levy Place New York, NY 10029 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Mt. Sinai Medical Center Senior Vice President Aggregate Year-to-date > $ 250.00	09/27/96	250.00

SUB TOTAL of Receipts This Page (Optional) ..... > 2,030.00

TOTAL this Period (Last page this line number only) ..... >

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 3
	FOR LINE NUMBER 11 a I

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Andrea M. Light Weatherby Health Care 25 Van Zant Steet Norwalk, CT 06855-1786	Weatherby Health Care Occupation: Controller	09/30/96	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 250.00		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Robert G. Kiely 34 Wildcat Springs Dr. Madison, CT 06443	Middlesex Memorial Hospital Occupation: President/CEO	09/30/96	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 250.00		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Ross P. Marine 11729 Central Street Kansas City, MO 64114	Truman Medical Center-East Occupation: Hospital Administrator	09/30/96	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 250.00		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Patricia Dian Sprenger 3708 Southland Drive Columbia, MO 65201	Missouri Hospital Association Occupation: Senior Vice President	09/30/96	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 250.00		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

SUB TOTAL of Receipts This Page (Optional) >	1,000.00
TOTAL this Period (Last page this line number only) >	5,960.00

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 12

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Healthcare Association of Hawaii 932 Ward Avenue, Suite 430 Honolulu, HI 96814		09/04/96	375.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 625.00		

B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Healthcare Association of Hawaii 932 Ward Avenue, Suite 430 Honolulu, HI 96814		09/25/96	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 625.00		

C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Healthcare Association of New York State 74 N. Pearl Street Albany, NY 12207		09/27/96	10,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 10,000.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

SUB TOTAL of Receipts This Page (Optional) >	10,625.00
TOTAL this Period (Last page this line number only) >	10,625.00

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 16

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Stupak for Congress P.O. Box 143 Menomice, MI 49858	Stupak for Congress Occupation	09/19/96	375.00
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 375.00		
B. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
C. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
D. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
E. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
F. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

SUB TOTAL of Receipts This Page (Optional) >	375.00
TOTAL this Period (Last page this line number only) >	375.00

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 17

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Northern Trust Bank 50 South LaSalle Street Chicago, IL 60606		09/30/96	163.89
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 3,794.82		

B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
CITIBANK P.O. Box 19748 Washington, DC 20036		09/30/96	578.87
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,588.85		

C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

SUB TOTAL of Receipts This Page (Optional) >	742.76
TOTAL this Period (Last page this line number only) >	742.76

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

PAGE 1 OF 1

FOR LINE NUMBER 21B

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Public Opinion Strategies 1033 North Fairfax Suite 120 Alexandria, VA 22314	Polling Services Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/11/96	12,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Public Opinion Strategies 1033 North Fairfax Suite 120 Alexandria, VA 22314	Portion Allocated to Richard Burr - See line 23 Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/27/96	-4,500.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Tarrance Group 201 N. Union Street Suite 410 Alexandria, VA 22314	Polling Services Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/11/96	12,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Tarrance Group 201 N. Union Street Suite 410 Alexandria, VA 22314	Portion Allocated to Scott Klug - See line 23 Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/13/96	-4,500.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Tarrance Group 201 N. Union Street Suite 410 Alexandria, VA 22314	Portion of 8/21/96 Payment Allocated to Bob Frank Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/20/96	-4,500.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Wirthlin Group 1363 Beverly Road McLean, VA 22101	Polling Services Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/11/96	12,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Wirthlin Group 1363 Beverly Road McLean, VA 22101	Portion Allocated to John Linder. See Line 23 Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/09/96	-4,500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Bellman Group 1000 Thomas Jefferson Street Suite 520 Washington, DC 2007	Portion Allocated to Frank Pallone See Line 23 (Paid 10/1/96) Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	09/06/96	-5,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)		

SUB TOTAL of Disbursements this page (Optional) ---------->	13,000.00
TOTAL this Period (Last page this line number only) ---------->	13,000.00

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 11
	FOR LINE NUMBER 23

SCHEDULE B — ITEMIZED DISBURSEMENTS

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 Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Ackerman for Congress P.O. Box 95 Fresh Meadows, NY 11365	Gary L. Ackerman, U.S. HOUSE 5th NY Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Wayne Allard for Senate Committee 507 Capitol Court, NE, #100 Washington, DC 20002	Wayne Allard, U.S. SENATE CO Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	3,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Alabama Republican Party P.O. Box 320800 Birmingham, AL 35232	Alabama Republican Party Disbursement For: [ ] Primary [ ] General [ ] Other (Specify) 1996	09/18/96	2,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Armey for Congress 3869 Beech Down Drive Chantilly, VA 22021-3348	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	09/30/96	-1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Ballenger for Congress P.O. Box 2552 Hickory, NC 28603	Cass Ballenger, U.S. HOUSE 10th NC Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Friends for Roy Blunt P.O. Box 278 Stafford, MO 65157	Roy Blunt, U.S. HOUSE 7th MO Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Boyd for Congress P.O. Box 15703 Tallahasse, FL 32317	Allen Boyd, U.S. HOUSE 2nd FL Disbursement For: [ ] Primary [ ] General [X] Other (Specify) 1996	09/18/96	2,500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Canady for Congress Committee 3869 Beech Down Drive Chantilly, VA 22021-3348	Charles T. Canady, U.S. HOUSE 12th FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	2,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Clayton for Congress 5 West Hargett Street, suite 905 Raleigh, NC 27601	Eva M. Clayton, U.S. HOUSE 1st NC Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00

SUB TOTAL of Disbursements this page (Optional) ---------->	12,500.00
TOTAL this Period (Last page this line number only) ---------->	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 11
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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Congressman Bob Clement Committee P.O. Box 150606 Nashville, TN	Bob Clement, U.S. HOUSE 5th TN Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	500.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Mac Collins for Congress 6309 Golf Course Square Alexandria, VA 22307	Michael A. Collins, U.S. HOUSE 3rd GA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/09/96	500.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Cook for Congress P.O. Box 11336 Salt Lake City, UT 84147	Merrill Cook, U.S. HOUSE 2nd UT Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/23/96	1,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Tom DeLay Congressional Committee 4010 Franconia Road Alexandria, VA 22310-2136	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	09/30/96	-1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Peter Deutsch for Congress P.O. Box 26778 Tamarac, FL 33320	Peter Deutsch, U.S. HOUSE 20th FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Lincoln Diaz-Balart for Congress Committee 9737 NW 41st Street, #131 Miami, FL 33178	Lincoln Diaz-Balart, U.S. HOUSE 21st FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Donovan for Congress 75 Essex Street Hackensack, NJ 07601	Kathleen Donovan, U.S. HOUSE 9th NJ Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/05/96	500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Doyle for Congress P.O. Box 17426 Pittsburgh, PA 15235	Michael F. Doyle, U.S. HOUSE 18th PA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Duncan for Congress P.O. Box 23500 Washington, DC 20026-3500	John J. Duncan, U.S. HOUSE 2nd TN Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	500.00

SUB TOTAL of Disbursements this page (Optional) ..... >	5,000.00
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 11
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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Friends of Jennifer Dunn 790 North Vermont, SE Arlington, VA 22203	Jennifer B. Dunn, U.S. HOUSE 8th WA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/30/96	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Ehlers for Congress Committee P.O. Box 3340 Grand Rapids, MI 49501	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	09/27/96	-75.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Anna Eshoo for Congress 555 Bryant Street, Box 335 Palo Alto, CA 94301	Anna G. Eshoo, U.S. HOUSE 14th CA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	2,500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Harris Fawell for Congress Committee P.O. Box 3896 Naperville, IL 60567	Harris W. Fawell, U.S. HOUSE 13th IL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/27/96	2,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Fazio for Congress Committee P.O. Box 990 Washington, DC 20044	Vic Fazio, U.S. HOUSE 3rd CA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/03/96	2,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Fazio for Congress Committee P.O. Box 990 Washington, DC 20044	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	09/03/96	-2,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Friends of Mark Foley 7414 74th Way West Palm Beach, FL 33407	Mark Adam Foley, U.S. HOUSE 16th FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Harold Ford for Congress 1470 Monroe Avenue Memphis, TN 38104	Harold E. Ford, U.S. HOUSE 9th TN Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Martin Frost Campaign Committee 555 New Jersey Avenue, N.W., Suite 201 Washington, DC 20001	Martin Frost, U.S. HOUSE 24th TX Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	500.00

SUB TOTAL of Disbursements this page (Optional) ..... >	7,925.00
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4 OF 11
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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
People for Ganske 5907 Grand Avenue Des Moines, IA 50312	Greg Ganske, U.S. HOUSE 4th IA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	500.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
People for Ganske 5907 Grand Avenue Des Moines, IA 50312	Greg Ganske, U.S. HOUSE 4th IA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	2,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Friends of Newt Gingrich 1085 Holcomb Bridge Road, Suite 190A Roswell, GA 30076	Newt Gingrich, U.S. HOUSE 6th GA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/03/96	5,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Goode for U.S. Congress 124 Orchard Ave. Rocky Mount, VA 24151	Virgil Goode, U.S. HOUSE 5th VA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Congressman Bart Gordon Committee 555 New Jersey Avenue, N.W., Suite 201 Washington, DC 20001	Bart Gordon, U.S. HOUSE 6th TN Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	500.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Hastert for Congress Committee 3047 Mozart Drive Silver Spring, MD 20904	J. Dennis Hastert, U.S. HOUSE 14th IL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,250.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Alcee Hastings for Congress 421 New Jersey Avenue, SE Washington, DC 20003	Alcee L. Hastings, U.S. HOUSE 23rd FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Hefner for Congress Committee 7426 Fountainhead Drive Annandale, VA 22003	W. (Bill) G. Hefner, U.S. HOUSE 8th NC Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Helms for Senate 425 Second Street, NE Washington, DC 20002	Jesse A. Helms, U.S. SENATE NC Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	2,000.00

SUB TOTAL of Disbursements this page (Optional) ..... >	13,750.00
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 11
	FOR LINE NUMBER 23

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Jenkins for Congress 107 E. Main St. Suite 321 Rodgesville, TN 37857	Bill Jenkins, U.S. HOUSE 1st TN Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	500.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Jenkins for Congress 107 E. Main St. Suite 321 Rodgesville, TN 37857	Bill Jenkins, U.S. HOUSE 1st TN Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	500.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Walter Jones, Jr. for Congress Committee P.O. Box 7332 Greenville, NC 27835-7332	Walter B. Jones, U.S. HOUSE 3rd NC Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Kilpatrick for U.S. Congress 5820 Forsyth Street Detroit, MI 48202	Carolyn Cheeks-Kilpatrick, U.S. HOUSE 15th MI Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Pete King for Congress Committee 6101 Edsall Road, #1205 Alexandria, VA 22304	Peter T. King, U.S. HOUSE 3rd NY Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	500.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Tom Latham for Congress 12139 Darnley Road Woodbridge, VA 22192	Tom Latham, U.S. HOUSE 5th IA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Friends of Dick Lugar 8465 Keystone Xing, Suite 200 Indianapolis, IN 46240	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 2000	09/30/96	-2,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Mahaffey for Congress 112 S 3rd Street Montezuma, IA 50171	Mike Mahaffey, U.S. HOUSE 3rd IA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Bill McCollum for Congress 790 North Vermont Street Arlington, VA 22203	Bill McCollum, U.S. HOUSE 8th FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/27/96	1,000.00

SUB TOTAL of Disbursements this page (Optional) ---------->	4,500.00
TOTAL this Period (Last page this line number only) ---------->	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6 OF 11
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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
McCrery for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Jim McCrery, U.S. HOUSE 5th LA [X] Primary [ ] General [ ] Other (Specify) 1996	09/03/96	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Friends of Scott McInnis P.O. Box 757 Fairfax, VA 22030	Scott McInnis, U.S. HOUSE 3rd CO [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
The Mellman Group 1000 Thomas Jefferson St. Suite 520 Washington, DC 20007	In-kind Poll - Frank Pallone (NJ-6) [ ] Primary [X] General [ ] Other (Specify) 1996	09/06/96	5,000.00 (In-Kind)
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Pallone for Congress P.O. Box 3176 Long Branch, NJ 07740	In-kind Poll - Frank Pallone (NJ-6) [ ] Primary [X] General [ ] Other (Specify) 1996	09/06/96	5,000.00 (Memo In-Kind)
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Menendez for Congress P.O. Box 523024 Springfield, VA 22152	Robert Menendez, U.S. HOUSE 13th NJ [ ] Primary [X] General [ ] Other (Specify) 1996	09/05/96	500.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Mica for Congress Committee 305 East Capitol Street, SE Washington, DC 20003	John L. Mica, U.S. HOUSE 7th FL [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Dan Miller for Congress 1001 3rd Avenue West, Suite 350 Brandenton, FL 34205	Dan Miller, U.S. HOUSE 13th FL [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Re-Elect Congressman Joe Moakley Committee P.O. Box 1073 Boston, MA 02205-9832	John Joseph Moakley, U.S. HOUSE 9th MA [X] Primary [ ] General [ ] Other (Specify) 1996	09/10/96	3,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day,Year)	Amount of Each Disb. this Period
Alan B. Mollohan for Congress P.O. Box 1343 Fairmount, WV 26554	Voided Check [X] Primary [ ] General [ ] Other (Specify) 1996	09/27/96	-200.00

SUB TOTAL of Disbursements this page (Optional) ..... >	12,300.00
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 7 OF 11
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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Sue Myrick for Congress P.O. Box 3091 Falls Church, VA 22043-0091	Sue Myrick, U.S. HOUSE 9th NC [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
The Richard E. Neal Committee P.O. Box 2884 Washington, DC 20013	Richard E. Neal, U.S. HOUSE 2nd MA [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	500.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Norwood for Congress 226 Fourth Street, NE Washington, DC 20002	Voided Check [ ] Primary [ ] General [X] Other (Specify) 1994	09/30/96	-2,500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Nussle for Congress Committee P.O. Box 2128 Waterloo, IA 50704	Jim Nussle, U.S. HOUSE 2nd IA [ ] Primary [X] General [ ] Other (Specify) 1996	09/09/96	500.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Nussle for Congress Committee P.O. Box 2128 Waterloo, IA 50704	Jim Nussle, U.S. HOUSE 2nd IA [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	2,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
L. F. Payne for Congress P.O. Box 2884 Washington, DC 20013	Voided Check [X] Primary [ ] General [ ] Other (Specify) 1996	09/30/96	-500.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
John Peterson for Congress 248 North Main Street Pleasantville, PA 16341	John Peterson, U.S. HOUSE 5th PA [ ] Primary [X] General [ ] Other (Specify) 1996	09/25/96	5,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Pomeroy for Congress 304 North 4th Street Bismarck, ND 58501	Earl Pomeroy, U.S. HOUSE 1st ND [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	2,500.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Porter for Congress P.O. Box 7126 Deerfield, IL 60015-7126	Voided Check [X] Primary [ ] General [ ] Other (Specify) 1996	09/30/96	-500.00

SUB TOTAL of Disbursements this page (Optional) ---------->	8,000.00
TOTAL this Period (Last page this line number only) ---------->	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 8 OF 11
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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Public Opinion Strategies 1033 North Fairfax Suite 120 Alexandria, VA 22314	In-kind Poll - Richard Burr (NC-5) Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/27/96	4,500.00 (In-Kind)
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Burr for Congress Post Office Box 5732 Winston-Salem, NC 27113	In-kind Poll - Richard Burr (NC-5) Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/27/96	4,500.00 (Memo In-Kind)
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Citizens for Kevin Quigley for Congress 1029 Springbrook Road Lake Stevens, WA 98258	Kevin Quigley, U.S. HOUSE 2nd WA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/13/96	2,500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Quinn for Congress 790 North Vermont Street Arlington, VA 22203	Jack Quinn, U.S. HOUSE 30th NY Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Lynn Rivers for Congress P.O. Box 8293 Ann Arbor, MI 48107-8293	Lynn N. Rivers, U.S. HOUSE 13th MI Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	500.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Pat Roberts for Senate 7900 Lynbrook Drive Bethesda, MD 20814	Pat Roberts, U.S. SENATE KS Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	5,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Pat Roberts for Senate 7900 Lynbrook Drive Bethesda, MD 20814	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	09/30/96	-500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Ros-Lehtinen for Congress Committee 4451 Brookfield Corporate Drive, 3200 Chantilly, VA 22021-1652	Ileana Ros-Lehtinen, U.S. HOUSE 18th FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Joe Scarborough for Congress P.O. Box 13012 Pensacola, FL 32591	Joe Scarborough, U.S. HOUSE 1st FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	500.00

SUB TOTAL of Disbursements this page (Optional) ..... >	14,500.00
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 9 OF 11
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SCHEDULE B — ITEMIZED DISBURSEMENTS

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 Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
The Schaefer To Congress Committee P.O. Box 1654 Englewood, CO 80150	Dan Schaefer, U.S. HOUSE 6th CO Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Bob Schaffer for Congress Committee 211 S. College Avenue #11 Fort Collins, CO 80525	Bob Schaffer, U.S. HOUSE 4th CO Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Sessions for Senate Committee PO Box 4278 Montgomery, AL 36103	Jeff Sessions, U.S. SENATE AL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/09/96	1,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Congressman E. Clay Shaw for Congress 3869 Beech Down Drive Chantilly, VA 22021-3348	E. Clay Shaw, U.S. HOUSE 22nd FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Coloradans for David Skaggs P.O. Box 65873 Washington, DC 20035-5873	David E. Skaggs, U.S. HOUSE 2nd CO Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Adam Smith for Congress Comm. 27030 47th Avenue, South Suite 104 Kent, WA 98032	Adam Smith, U.S. HOUSE 9th WA Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/13/96	2,500.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Vic Snyder for Congress 1020 West 3rd Little Rock, AR 72201	Vic Snyder, U.S. HOUSE 2nd AR Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	1,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Stupak for Congress 3610 38th Street, N.W., Unit F270 Washington, DC 20016	Voided Check Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	09/30/96	-500.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
Susan Sweetser for Congress 139 Main Street Montpelier, VT 05602	Susan Sweetser, U.S. HOUSE VT Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00

SUB TOTAL of Disbursements this page (Optional) ..... >	9,000.00
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 OF 11
	FOR LINE NUMBER 23

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
American Hospital Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
A. Dick Swett for Senate 100 Main Street Washington, DC 20008	Dick Swett, U.S. SENATE NH Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	3,000.00
B. Gene Taylor for Congress P.O. Box 38 Bay St. Louis, MS 39520	Gene Taylor, U.S. HOUSE 5th MS Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00
C. The Charles Taylor for Congress Committee P.O. Box 2355 Asheville, NC 28802	Charles H. Taylor, U.S. HOUSE 11th NC Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
D. The Freedom Project 111 C Street,SE Lower Unit Washington, DC 20003	Contribution Disbursement For: [ ] Primary [ ] General [ ] Other (Specify)	09/24/96	5,000.00
E. The Tarrance Group 201 N. Union Street Suite 410 Alexandria, VA 22314	In-kind Poll - Scott Klug (WI-2) Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/13/96	4,500.00 (In-Kind)
F. Klug for Congress, Inc. P.O. Box 5619 Madison, WI 53705	In-kind Poll - Scott Klug (WI-2) Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/13/96	4,500.00 (Memo In-Kind)
G. The Tarrance Group 201 N. Union Street Suite 410 Alexandria, VA 22314	In-kind Poll - Bob Franks (NJ-7) Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/20/96	4,500.00 (In-Kind)
H. Franks for Congress Committee P.O. Box 661 New Providence, NJ 07974	In-kind Poll - Bob Franks (NJ-7) Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/20/96	4,500.00 (Memo In-Kind)
I. Karen Thurman for Congress Committee P.O. Box 2816 Gainesville, FL 32602	Karen L. Thurman, U.S. HOUSE 5th FL Disbursement For: [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	1,000.00

SUB TOTAL of Disbursements this page (Optional) ..... >	20,000.00
TOTAL this Period (Last page this line number only) ..... >	

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

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FOR LINE NUMBER 23

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
American Hospital Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Volkmer for Congress P.O. Box 991 Hannibal, MO 63401	Harold L. Volkmer, U.S. HOUSE 9th MO [ ] Primary [X] General [ ] Other (Specify) 1996	09/18/96	2,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Watt for Congress 700 East Stonewall, #500 Charlotte, NC 28202	Melvin L. Watt, U.S. HOUSE 12th NC [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	1,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Watts for Congress Committee 1212 North Vernon Street Arlington, VA 22201	J.C. Watts, U.S. HOUSE 4th OK [ ] Primary [X] General [ ] Other (Specify) 1996	09/24/96	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Robert Wexler for Congress Committee 2500 N. Military Trail Suite 288 Boca Raton, FL 33431	Robert Wexler, U.S. HOUSE 19th FL [ ] Primary [ ] General [X] Other (Specify) 1996	09/18/96	2,500.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Rick White for Congress Committee P.O. Box 8156 Kirkland, WA 98036	Rick White, U.S. HOUSE 1st WA [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	2,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
The Wirthlin Group 1363 Beverly Road McLean, VA 22101	In-kind Poll - John Linder (GA-4) [ ] Primary [X] General [ ] Other (Specify) 1996	09/09/96	4,500.00 (In-Kind)
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
John Linder for Congress P.O. Box 942060 Atlanta, GA 30341	In-kind Poll - John Linder (GA-4) [ ] Primary [X] General [ ] Other (Specify) 1996	09/09/96	4,500.00 (Memo In-Kind)
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Wynn for Congress 8700 Central Avenue, Suite 306 Landover, MD 20785	Albert R. Wynn, U.S. HOUSE 4th MD [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	500.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For:	Date (Month day, Year)	Amount of Each Disb. this Period
Zimmer for Senate 4451 Brookfield Corporate Drive, #200 Chantilly, VA 22021-1652	Richard Zimmer, U.S. SENATE NJ [ ] Primary [X] General [ ] Other (Specify) 1996	09/10/96	5,000.00

SUB TOTAL of Disbursements this page (Optional) ----------> 18,000.00

TOTAL this Period (Last page this line number only) ----------> 125,475.00

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 received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 10-15-96
☐	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

PREPARER

10-19-96
DATE PREPARED

FEC FORM 70-2 (12/92)