01/28/2005 12 : 31

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Association of Orthodontists Political Action Committee

ADDRESS (number and street) ▼ 401 N. Lindbergh Blvd

Check if different than previously reported. (ACC)

St. Louis | MO | 63141

2. **FEC IDENTIFICATION NUMBER** ▼ C00293910

CITY ▲ STATE ▲ ZIPCODE ▲

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

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

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

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

Election on 11 02 2004 in the State of MO

5. Covering Period 10 14 2004 through 11 22 2004

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 James R. Bowlin

Signature of Treasurer Electronically Filed by James R. Bowlin Date 01 28 2005

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
American Association of Orthodontists Political Action Committee

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		77302.33
(b) Cash on Hand at Begining of Reporting Period	21582.33	
(c) Total Receipts (from Line 19)	26485.00	159515.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	48067.33	236817.33
7. Total Disbursements (from Line 31)	-2000.00	186750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50067.33	50067.33
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Association of Orthodontists Political Action Committee

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	13700.00	
(ii) Unitemized	12785.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	26485.00	159515.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ▶	26485.00	159515.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	26485.00	159515.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26485.00	159515.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	-2000.00	186750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	-2000.00	186750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	-2000.00	186750.00

DETAILED SUMMARY PAGE

of Disbursements

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)	26485.00	159515.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26485.00	159515.00
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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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 Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Thomas L. Ahman
Mailing Address 2777 Shagbark Dr
City: Lima State: OH Zip Code: 45806
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 29 2004
Transaction ID: R12224
Amount of Each Receipt this Period: 150.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Lori Anderson Aiosa
Mailing Address 1894 Osprey Bluff Blvd
City: Orange Park State: FL Zip Code: 32003
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 29 2004
Transaction ID: R12186
Amount of Each Receipt this Period: 150.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Albert J. Apicella
Mailing Address 27 S Lewisberry Rd
City: Mechanicsburg State: PA Zip Code: 17055
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 10 29 2004
Transaction ID: R12215
Amount of Each Receipt this Period: 100.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Dan Banh
Mailing Address 848 S La Serena Dr
City: West Covina State: CA Zip Code: 91791
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 10 2004
Transaction ID: R12279
Amount of Each Receipt this Period: 150.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Gary R. Baughman
Mailing Address 4011 Fort Donelson Dr
City: Stockton State: CA Zip Code: 95219
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R12228
Amount of Each Receipt this Period: 250.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Michael J. Bernard
Mailing Address 1870 Ashford Cir NE
City: North Canton State: OH Zip Code: 44720
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 11 10 2004
Transaction ID: R12284
Amount of Each Receipt this Period: 150.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Kathryn Lynn Bielik
Mailing Address 1430 N LaSalle St E 1
City: Chicago State: IL Zip Code: 60610
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 11 10 2004
Transaction ID: R12278
Amount of Each Receipt this Period: 150.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Robert E. Binder
Mailing Address 235 White Oak Ridge Rd
City: Short Hills State: NJ Zip Code: 07078
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 29 2004
Transaction ID: R12192
Amount of Each Receipt this Period: 150.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Harry I. Busse, Jr.
Mailing Address 726 Langwood
City: Houston State: TX Zip Code: 77079
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 10 2004
Transaction ID: R12261
Amount of Each Receipt this Period: 150.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 450.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. John D. Callahan, Jr.
Mailing Address 4 Morton Rd
City: Dewitt State: NY Zip Code: 13214
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 10 29 2004
Transaction ID: R12205
Amount of Each Receipt this Period: 500.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Dr. James D. Campbell
Mailing Address 3107 W 30th Ct
City: Panama City State: FL Zip Code: 32405
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12266
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Jeffrey Thomas Cavanaugh
Mailing Address 314 Cove Landing Dr
City: Wildwood State: MO Zip Code: 63040
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 10 2004
Transaction ID: R12275
Amount of Each Receipt this Period: 150.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 800.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Robert E. Chavez
Mailing Address 188 Ames St
City: Sharon State: MA Zip Code: 02067
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12289
Amount of Each Receipt this Period: 250.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Dennis G. Cuendet
Mailing Address 7241 Woodstock Dr
City: Baton Rouge State: LA Zip Code: 70809
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 29 2004
Transaction ID: R12187
Amount of Each Receipt this Period: 150.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. David Wayne Engen
Mailing Address 18020 N Addison Ct
City: Colbert State: WA Zip Code: 99005
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 29 2004
Transaction ID: R12203
Amount of Each Receipt this Period: 250.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Rex H. Ervin
Mailing Address 14837 Hill Rd
City: Klamath Falls State: OR Zip Code: 97603
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 11 19 2004
Transaction ID: R12319
Amount of Each Receipt this Period: 150.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. John H. Ferguson
Mailing Address 163 P A Johns Road N E
P O Box 850
City: Milledgeville State: GA Zip Code: 31061
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 29 2004
Transaction ID: R12223
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Daniel R. Fiehler
Mailing Address Box 811
City: Helena State: MT Zip Code: 59624
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 29 2004
Transaction ID: R12229
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Kenneth F. Freer
Mailing Address 4500 Green Valley Rd
City: Fairfield State: CA Zip Code: 94534
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 11 10 2004
Transaction ID: R12290
Amount of Each Receipt this Period: 250.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Steven G. Garrett
Mailing Address 788 Johnston Ct
City: Winchester State: VA Zip Code: 22601
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12242
Amount of Each Receipt this Period: 250.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Hilton Goldraich
Mailing Address 2204 Bradbury Ct
City: Plano State: TX Zip Code: 75093
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 10 2004
Transaction ID: R12238
Amount of Each Receipt this Period: 150.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Jon Ethan Golub
Mailing Address 50 Blueberry Dr
City: Woodcliff Lake State: NJ Zip Code: 07675
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12291
Amount of Each Receipt this Period: 250.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Steven D. Harrison
Mailing Address Rte 4 Box 176
City: Rolla State: MO Zip Code: 65401
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 29 2004
Transaction ID: R12202
Amount of Each Receipt this Period: 250.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. M. Donald Hayes
Mailing Address 737 Timberlane
City: Wilmington State: OH Zip Code: 45177
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12243
Amount of Each Receipt this Period: 250.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Steven P. Hearne
Mailing Address 5000 Gardner Ln
City: Suffolk State: VA Zip Code: 23434
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 11 10 2004
Transaction ID: R12296
Amount of Each Receipt this Period: 150.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Dr. Calvin K. Heinrich
Mailing Address 515 Carnation Drive
City: Clarks Summit State: PA Zip Code: 18411
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 11 18 2004
Transaction ID: R12317
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Steven John Henseler
Mailing Address 1856 Lochaven Dr
City: Woodbury State: MN Zip Code: 55125
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 11 10 2004
Transaction ID: R12286
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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 Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. James Brian Indiveri
Mailing Address 5033-3 Glenwood Ave
City: Mission State: KS Zip Code: 66202
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 19 2004
Transaction ID: R12321
Amount of Each Receipt this Period: 150.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Mark W. Johnston
Mailing Address 76 Old Stonemill Rd
City: Marietta State: GA Zip Code: 30067
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 10 2004
Transaction ID: R12265
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. David C. Jones
Mailing Address 975 Stonewall Jackson Tr
City: Martinsville State: VA Zip Code: 24112
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 11 10 2004
Transaction ID: R12268
Amount of Each Receipt this Period: 150.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Jeffrey W. Jordan
Mailing Address 1040 Lake Shore Overlook
City: Alpharetta State: GA Zip Code: 30005
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 10 2004
Transaction ID: R12298
Amount of Each Receipt this Period: 500.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Keith A. Kamnitz
Mailing Address 12716 Diamond Dr
City: Burnsville State: MN Zip Code: 55337
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 11 10 2004
Transaction ID: R12235
Amount of Each Receipt this Period: 100.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Robert W. Kidd, III
Mailing Address PO Box 232
City: Wyoming State: DE Zip Code: 19934
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R12204
Amount of Each Receipt this Period: 500.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Kerry W. Kirsch
Mailing Address 928 Winterset Rd
City: Ebensburg State: PA Zip Code: 15931
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 550.00

Date of Receipt: 10 29 2004
Transaction ID: R12290
Amount of Each Receipt this Period: 300.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Valmy P. Kulbersh
Mailing Address 1417 Cedar Bend Dr
City: Bloomfield Hills State: MI Zip Code: 48302
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 450.00

Date of Receipt: 10 29 2004
Transaction ID: R12182
Amount of Each Receipt this Period: 150.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Paul Ledner
Mailing Address Box 37
City: Oneida State: IL Zip Code: 61467
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 10 2004
Transaction ID: R12287
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Melvyn M. Leifert
Mailing Address 14 Rutland Rd
City: Great Neck State: NY Zip Code: 11020
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 11 10 2004
Transaction ID: R12295
Amount of Each Receipt this Period: 250.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Carey D. Loucks
Mailing Address 900 W 18th St S
City: Newton State: IA Zip Code: 50208
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 18 2004
Transaction ID: R12314
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. David Markham
Mailing Address 1820 W El Camino Ave #170
City: Sacramento State: CA Zip Code: 95833
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: 11 10 2004
Transaction ID: R12289
Amount of Each Receipt this Period: 500.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 900.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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 Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. James W. McDaniel
Mailing Address 1201 Rocky Dell Ln
City: Signal Mountain State: TN Zip Code: 37377
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12245
Amount of Each Receipt this Period: 250.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Dr. Robert B. Meyer
Mailing Address 110 Widecomb Ct
City: Cary State: NC Zip Code: 27513
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 29 2004
Transaction ID: R12184
Amount of Each Receipt this Period: 150.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Frank R. Miller
Mailing Address 619 Sunset Hill
City: Rockwall State: TX Zip Code: 75087
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 29 2004
Transaction ID: R12180
Amount of Each Receipt this Period: 150.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Kambiz Moin
Mailing Address 133 Shepherd Rd
City: Manchester State: NH Zip Code: 03104
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 11 10 2004
Transaction ID: R12244
Amount of Each Receipt this Period: 250.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Dr. J. Gregory Morris
Mailing Address 4804 Hunters Crossing
City: Valdosta State: GA Zip Code: 31602
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 10 2004
Transaction ID: R12292
Amount of Each Receipt this Period: 250.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Karl F. Muster
Mailing Address 809 Ayrshire Dr
City: Champaign State: IL Zip Code: 61820
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R12201
Amount of Each Receipt this Period: 250.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 27
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial): Dr. John O. Nord
Mailing Address: 3650 21st Ave S
City: Grand Forks | State: ND | Zip Code: 58201
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 10 29 2004
Transaction ID: R12214
Amount of Each Receipt this Period: 100.00
Check

B.
Full Name (Last, First, Middle Initial): Dr. Carlyn S. Phucas
Mailing Address: 59 Bortons Rd
City: Marlton | State: NJ | Zip Code: 08053
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 10 2004
Transaction ID: R12300
Amount of Each Receipt this Period: 500.00
Check

C.
Full Name (Last, First, Middle Initial): Dr. Ray S. Rafetto
Mailing Address: 721 Ann Dr
City: Kennett Square | State: PA | Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 11 19 2004
Transaction ID: R12326
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 850.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 27
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Michael D. Riordan
Mailing Address 7114 Montgomery Rd
City: Lake Wilie State: SC Zip Code: 29710
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 19 2004
Transaction ID: R12310
Amount of Each Receipt this Period: 250.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Dr. Robert A. Rilucci
Mailing Address 24 Tarragon Dr
PO Box 985
City: East Sandwich State: MA Zip Code: 02537
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 10 22 2004
Transaction ID: R12163
Amount of Each Receipt this Period: 150.00
Credit Card

C.
Full Name (Last, First, Middle Initial)
Dr. Lee M. Romine
Mailing Address 113 Daniel
City: Natchitoches State: LA Zip Code: 71457
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 10 2004
Transaction ID: R12237
Amount of Each Receipt this Period: 150.00
Credit Card

SUBTOTAL of Receipts This Page (optional) ..... ▶ 550.00

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. George J. Sabol, III
Mailing Address 1432 Water Mill Cr
City: Virginia Beach State: VA Zip Code: 23454
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 19 2004
Transaction ID: R12325
Amount of Each Receipt this Period: 250.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. Tom H. Shelly
Mailing Address 714 - 15th Ave No
City: Fort Dodge State: IA Zip Code: 50501
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 10 2004
Transaction ID: R12281
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Richard A. Simms
Mailing Address 29654 Highpoint Road
City: Rancho Palos Verde State: CA Zip Code: 90275
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 10 2004
Transaction ID: R12283
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial): Dr. David C. Spokane
Mailing Address: 108 Brian Dr
City: Beaver State: PA Zip Code: 15009
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R12200
Amount of Each Receipt this Period: 250.00
Credit Card

B.
Full Name (Last, First, Middle Initial): Dr. Albert M. Stush, Jr.
Mailing Address: RR#5 Box 36 A
City: Mifflinburg State: PA Zip Code: 17844
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 10 2004
Transaction ID: R12302
Amount of Each Receipt this Period: 150.00
Check

C.
Full Name (Last, First, Middle Initial): Dr. Timothy Allen Theisen
Mailing Address: 6940 Wicksbury Ln
City: Rockford State: IL Zip Code: 61114
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 29 2004
Transaction ID: R12227
Amount of Each Receipt this Period: 250.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. W. Michael Thomas
Mailing Address 43 Moharimet Dr
City: Madbury State: NH Zip Code: 03820
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 29 2004
Transaction ID: R12209
Amount of Each Receipt this Period: 100.00
Check

B.
Full Name (Last, First, Middle Initial)
Dr. William F. Tinsley
Mailing Address 199 Echo Lake Dr
City: Bangor State: PA Zip Code: 18013
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 10 2004
Transaction ID: R12294
Amount of Each Receipt this Period: 250.00
Check

C.
Full Name (Last, First, Middle Initial)
Dr. Nancy L. Villa
Mailing Address 45 Laird Rd
City: Colts Neck State: NJ Zip Code: 07722
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: 11 19 2004
Transaction ID: R12327
Amount of Each Receipt this Period: 500.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 850.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Orthodontists Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Fredric R. Warren
Mailing Address 3322 Stage Coach Dr
City: Lafayette State: CA Zip Code: 94549
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 10 22 2004
Transaction ID: R12161
Amount of Each Receipt this Period: 250.00
Credit Card

B.
Full Name (Last, First, Middle Initial)
Dr. Joseph F. Zgrodnik
Mailing Address 5 Meadowbrook Dr
City: Hadley State: MA Zip Code: 01035
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 10 2004
Transaction ID: R12259
Amount of Each Receipt this Period: 100.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 350.00

TOTAL This Period (last page this line number only) ..... ▶ 13700.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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 Association of Orthodontists Political Action Committee

A. Full Name (Last, First, Middle Initial)
Friends of Clay Shaw

Mailing Address 2600 N E 14th Street Causeway

City: Pompano Beach
State: FL
Zip Code: 33062

Purpose of Disbursement
Returned Check #1332 dated 8/5/2004 for

Candidate Name
Clay Shaw, Jr.

Office Sought: X House / Senate / President
State: FL District: 22

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: D697
Date of Disbursement
11 / 18 / 2004

Amount of Each Disbursement this Period
-2000.00

Category/Type
Clay Shaw, Jr. (FL-22-R).

SUBTOTAL of Disbursements This Page (optional) ..... ▶	-2000.00
TOTAL This Period (last page this line number only) ..... ▶	-2000.00