REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION MAIL RO

APR 15 9 53 AM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) AMERICAN ASSOCIATION OF PHYSICIAN SPECIALISTS, INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
2296 HENDERSON MILL ROAD SUITE 206

CITY, STATE and ZIP CODE
ATLANTA GA 30345

2. FEC IDENTIFICATION NUMBER
C 00331017

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

☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____

☐ 30-Day Post-Election 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 JAN 1, 1999 through MARCH 31, 1999		
6. (a) Cash on Hand January 1, 19 99		$ 10,736.54
(b) Cash on Hand at Beginning of Reporting Period	$ 10,736.54	
(c) Total Receipts (from Line 19)	$ 4,149.00	$ 4,149.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 14,885.54	$ 14,885.54
7. Total Disbursements (from Line 30)	$ 12,679.79	$ 12,679.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2,205.75	$ 2,205.75
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)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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
WYNN BUSBY

Signature of Treasurer
Wynn Busby

Date
4-14-99

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)

FE8A/004

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

(revised 1/1/91)

NAME OF COMMITTEE AMERICAN ASSOCIATION OF PHYSICIAN SPECIALISTS INC POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM TO:

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2,149.00	2,149.00	11(a)(i)
ii. Unitemized	2,000.00	2,000.00	11(a)(ii)
iii. Total (add i and ii) ➤	4,149.00	4,149.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	4,149.00	4,149.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	4,149.00	4,149.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	4,149.00	4,149.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	12,679.79	12,679.79	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	12,679.79	12,679.79	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	12,679.79	12,679.79	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	12,679.79	12,679.79	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4,149.00	4,149.00	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,149.00	4,149.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	12,679.79	12,679.79	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	12,679.79	12,679.79	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a(i)

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 PHYSICIAN SPECIALISTS, INC. POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Dr. Christopher L. Clark 215 East Grand Ave Old Orchard Beach ME 04064 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Temple Physicians Inc. Occupation: Physician Aggregate Year-to-Date $ 1,000 00	1/19/99	1,000 00
B. Dr. Adrian de la Torre Jr 42103 Mohave Rose Drive Lancaster CA 93536 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Dr. Adrian de la Torre Jr Occupation: Self employed physician Aggregate Year-to-Date $ 249.00	1/28/99 3/2/99 3/31/99	83 00 83.00 83.00
C. Cpt. Charles M House 1300 Douglas Circle Key West FL 33040 Receipt For: [ ] Primary [X] General [ ] Other (specify):	US Navy Occupation: Physician Aggregate Year-to-Date $ 300 00	1/28/99 3/2/99 3/31/99	100.00 100.00 100.00
D. Dr. Richard J. Misischia 7410 Watersilk Drive Pinellas Park FL 33782 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Dr. Richard J. Misischia Occupation: Physician Aggregate Year-to-Date $ 300.00	3/12/99	300.00
E. Dr F M Shultz 2410 Crockett Drive Brownwood TX 76801 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Dr. F.M Shultz Occupation: Self employed physician Aggregate Year-to-Date $ 300 00	1/28/99 3/2/99 3/21/99	100.00 100.00 100.00
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 2,149.00

TOTAL This Period (last page this line number only) 2,149.00

FEBANDS4

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full) AMERICAN ASSOCIATION OF PHYSICIAN SPECIALISTS, INC. POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Prentice Hall Customer Service P O Box 11075 Des Moines IA 50336 1075	Reference Book Disbursement for: [ ] Primary [X] General [ ] Other (specify)	1/13/99	49.91
B. Johnson & Scarborough, LLP 2571 Chain Bridge Road Vienna, VA 22181	Accounting Services Disbursement for: [ ] Primary [x] General [ ] Other (specify)	1/13/99	525.00
C. Cobweb Communications Inc 6409 Stoney Creek Court Austell GA 30168 5237	Software install, and training Disbursement for: [ ] Primary [x] General [ ] Other (specify)	1/13/99	1,557.00
D. NationsBank PO Box 4899 Atlanta GA 30302	Merchant billing discount Disbursement for: [ ] Primary [x] General [ ] Other (specify)	1/19/99	60.80
E. NationsBank PO Box 4899 Atlanta GA 30302	Bankcard processing Disbursement for: [ ] Primary [x] General [ ] Other (specify)	1/22/99	40.00
F. American Express Service Center @ Fort Lauderdale PO Box 297812 Ft. Lauderdale FL 33329	Credit card fees Disbursement for: [ ] Primary [x] General [ ] Other (specify)	2/01/99	8.74
G. Cobweb Communications Inc 6409 Stoney Creek Court Austell GA 30168 5237	Purchase of software Disbursement for: [ ] Primary [x] General [ ] Other (specify)	2/4/99	3,995.00
H. Don Connelly & Associates P O Box 536 Avondale Estates GA 30002	Design logo & stationary suite Disbursement for: [ ] Primary [x] General [ ] Other (specify)	2/4/99	1,000.00
I. NationsBank PO Box 4899 Atlanta GA 30302	Merchant billing discount Disbursement for: [ ] Primary [x] General [ ] Other (specify)	2/16/99	52.43

SUBTOTAL of Disbursements This Page (optional) 7,288.88

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full) AMERICAN ASSOCIATION OF PHYSICIAN SPECIALISTS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Johnson & Scarborough, LLP 2571 Chain Bridge Road Vienna, VA 22181	Accounting services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	2/23/99	540.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cobweb Communications Inc 6409 Stoney Creek Court Austell GA 30168 5237	Update software Disbursement for: [ ] Primary [X] General [ ] Other (specify)	2/23/99	225.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express Service Center @ Fort Lauderdale PO Box 297812 Fort Lauderdale FL 33329	Credit card fees Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/02/99	8.74
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Johnson & Scarborough, LLP 2571 Chain Bridge Road Vienna VA 22181	Accounting services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/4/99	843.57
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Graphics Inc 725 DeKalb Industrial Way Decatur GA 30033	Newsletter shells Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/4/99	3,723.60
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NationsBank PO Box 4899 Atlanta GA 30302	Merchant billing discount Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/15/99	40.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NationsBank PO Box 4899 Atlanta GA 30302	Bank service charge Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/31/99	10.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	5,390.91
TOTAL This Period (last page this line number only)	12,679.79

FEBAN004

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 4-15-99
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SG	4-15-99
PREPARER	DATE PREPARED

(4/98)