

**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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

ADDRESS (number and street) **8201 Greensboro Drive**
Suite 300
 Check if different than previously reported. (ACC) **McLean VA 22102**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00168070 3. IS THIS REPORT NEW (N) OR X AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
X July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:		Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report(Q3)			Convention (12C)	Special (12S)	
January 31 Quarterly Report(YE)		Election on			in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on			in the State of

5. Covering Period 04 01 2002 through 06 30 2002

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 Mr. Tristan North
 Signature of Treasurer Electronically Filed by Mr. Tristan North Date 10 21 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^h0^h4^h ^D0^D1^D ^v2^v0^v0^v2^v To: ^h0^h6^h ^D0^D3^D0^D ^v2^v0^v0^v2^v

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2 ^v 0 ^v 0 ^v 2 ^v		29426.58
(b) Cash on Hand at Beginning of Reporting Period	42703.58	
(c) Total Receipts (from Line 19)	2150.00	15427.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	44853.58	44853.58
7. Total Disbursements (from Line 30)	12000.00	12000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32853.58	32853.58
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	

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 (Revised 1/2001)

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Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^{MM}04 ^{DD}01 ^{YYYY}2002 To: ^{MM}06 ^{DD}30 ^{YYYY}2002

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	250.00	
(i) Itemized (use Schedule A)		
(ii) Unitemized	1900.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2150.00	10625.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	2150.00	11225.00
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 36, page 4)	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	4202.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	2150.00	15427.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	2150.00	15427.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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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.....	12000.00	12000.00
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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	12000.00	12000.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	12000.00	12000.00
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	2150.00	11225.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	2150.00	11225.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	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: (check only one)			PAGE 5 / 8		
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. Mr. Harvey Hall

Mailing Address
1001 21st Street

City State Zip Code
Bakerfield CA 93301

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2002

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
250.00

Name of Employer Occupation Donation
Hall Ambulance Service

Receipt For: Aggregate Year-to-Date ▼
 Primary General Other (specify) ▼ **500.00**

Transaction ID: **SA11A1.4257**

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	250.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. JIM NUSSLE		Date of Disbursement 06 / 27 / 2002
Mailing Address P.O. Box 324 City Manchester State IA Zip Code 52057		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: IA District: 01		Transaction ID: SB23.4260

Full Name (Last, First, Middle Initial) B. LUTHER FOR CONGRESS VOLUNTEER COMMITTEE		Date of Disbursement 06 / 27 / 2002
Mailing Address 1399 Geneva Avenue North Ste 202 City Oakdale State MN Zip Code 55128		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: MN District: 02		Transaction ID: SB23.4263

Full Name (Last, First, Middle Initial) C. MIKE ROSS FOR CONGRESS COMMITTEE		Date of Disbursement 05 / 07 / 2002
Mailing Address PO BOX 380 City PRESCOTT State AR Zip Code 71857		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	
State: AR District: 04		Transaction ID: SB23.4265

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE CONTRIBUTIONS		Date of Disbursement 05 / 07 / 2002
Mailing Address 320 FIRST STREET SE City: WASHINGTON State: DC Zip Code: 20003		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Contribution		Transaction ID: SB23.4267
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/>	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Pat Toomey for Congress		Date of Disbursement 06 / 27 / 2002
Mailing Address 902 Union Blvd. City: Allentown State: PA Zip Code: 18109		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution		Transaction ID: SB23.4271
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. RANGEL FOR CONGRESS		Date of Disbursement 05 / 17 / 2002
Mailing Address PO BOX 5577 MANHATTANVILLE STA City: NEW YORK State: NY Zip Code: 10027		Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Contribution		Transaction ID: SB23.4269
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2002 Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: NY District: 15	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

**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)

PAGE 6 / 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. WALLY HERGER FOR CONGRESS COMMITTEE		Date of Disbursement 05 / 13 / 2002
Mailing Address P.O. Box 1500 City: Chico State: CA Zip Code: 95627		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 02	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
Transaction ID: SB23.4273		

Full Name (Last, First, Middle Initial) B. WALSH FOR CONGRESS COMMITTEE		Date of Disbursement 06 / 13 / 2002
Mailing Address 306 WINKWORTH PARKWAY City: SYRACUSE State: NY Zip Code: 13215		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
Transaction ID: SB23.4275		

C.

SUBTOTAL of Disbursements This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	12000.00