22037880153

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

2002 DEC -8 P 12:29

Office Use Only

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

ADDRESS (number and street) ▼

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ C 0 0 2 4 0 2 1 8

CITY ▲ — STATE ▲ — ZIP CODE ▲

3. IS THIS REPORT ☐ NEW (N) OR ☐ 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 Year-End 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 (12S)

Election on ___ / ___ / ___ In the State of ___

(d) 30-Day POST-Election Report for the: ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on 11 / 05 / 2002 In the State of CA

5. Covering Period 10 / 01 / 2002 through 11 / 25 / 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 Raoul Smyth

Signature of Treasurer [signature] Date 11 / 25 / 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.

Office Use Only							

FEC FORM 3X (Revised 1/01)

FE2/N043

22037880154

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00240218

Report Covering the Period: From: 10 01 2002 To: 11 25 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		167,500.5
(b) Cash on Hand at Beginning of Reporting Period	8,515.19	
(c) Total Receipts (from Line 19)	3,782.70	22,569.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12,297.89	39,319.75
7. Total Disbursements (from Line 30)	1,000.12	28,021.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11,297.77	11,297.77
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

22037880155

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01) Page 3

Write or Type Committee Name

APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00240218

Report Covering the Period: From: 10 01 2002 To: 11 25 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		
(i) Itemized (use Schedule A)	3,333.84	
(ii) Unitemized	440.60	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	3,774.44	22,430.78
(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 32, page 4) ▶	3,774.44	22,430.78
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.)	8.26	138.92
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) ▶	3,782.70	22,569.70
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	3,782.70	22,569.70

FESAN04-2

DETAILED SUMMARY PAGE

of Disbursements

C00240210

FEC Form 3X (Revised 1/01)

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	0.12	21.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0.12	21.98
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	28,000.00
24. Independent Expenditures (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) ▶	1,000.12	28,021.98
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	1,000.12	28,021.98

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	3,774.44	22,430.78
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3,774.44	22,430.78
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.12	21.98
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	0.12	21.98

SCHEDULE A

ITEMIZED RECEIPTS
(Contributions from Individuals/
Persons Other Than Political Committees)

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

PAGE 1 OF 4
FOR LINE NUMBER 11(a)(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)
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00240218

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
Abood, Robert G. 8 Oakland Court Safety Harbor, FL 34695	Apria Healthcare, Inc. SVP, Acquisitions Aggregate Year-to-date> $1,000.00 Bi-Weekly PR Deduction of... $50.00		Total this period	200.00
Barton, Mary E. 15635 S. 37th Way Phoenix, AZ 85045	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $315.00 Bi-Weekly PR Deduction of... $15.00		Total this period	65.00
Barton, Robin 23032 Mullin Road Lake Forest, CA 92630	Apria Healthcare, Inc. Division V.P., Sales Aggregate Year-to-date> $695.00 Bi-Weekly PR Deduction of... $30.00		Total this period	120.00
Berney, Stephanie A. 221 Billingrath Farm Lane Apex, NC 27502	Apria Healthcare, Inc. Division Revenue Mgr. Aggregate Year-to-date> $210.00 Bi-Weekly PR Deduction of... $10.00		Total this period	80.00
Bianchi, Francesco 11 Starlight Irvine, CA 92612	Apria Healthcare, Inc. SVP, Human Resources Aggregate Year-to-date> $460.00 Bi-Weekly PR Deduction of... $20.00		Total this period	80.00

SUBTOTAL of Receipts This Page (Optional).....> $500.00

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

22037880158

SCHEDULE A — ITEMIZED RECEIPTS (Contributions from Individuals/ Persons Other Than Political Committees)

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

PAGE 2 OF 0

FEC LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Apria Healthcare, Inc. Political Action Committee C00244818

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
Burton, Alexa J. 4651 Gundry Avenue Long Beach, CA 90807	Apria Healthcare, Inc. Mgr. Info Systems Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $20.00		Total this period	40.00
Carson, Cheryl A. 700 West 68th Avenue Anchorage, AK 99515	Apria Healthcare, Inc. Branch Manager Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $20.00		Total this period	40.00
Charbonnet, Stephen D. 1329 Morning Tree Drive St. Louis, MO 63017	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $345.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00
Clark, Mary K. 91 Bell Canyon Drive Dana Canyon, CA 92679	Apria Healthcare Group VP,Contract Services Aggregate Year-to-Date> $345.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00
Clements, Tom D. 11039 250th Place N. Redmond, WA 98053	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00		Total this period	40.00

SUBTOTAL of Receipts This Page (Optional) ..... > $240.00

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

22037880159

SCHEDULE A

ITEMIZED RECEIPTS
(Contributions from Individuals/
Persons Other Than Political Committees)

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

PAGE 2 OF 8
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00240218

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
Dommey, Nichole 5737 Grand Point Lane Elk Grove, CA 95758	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $660.00 Bi-Weekly PR Deduction of... $20.00		Total this period	80.00
Dobbs, Michael B. 9 Weather Ledge Coto de Caza, CA 92679	Apria Healthcare EVP, Logistics Aggregate Year-to-date> $345.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00
Domenico, Anthony 27562 Gold Dust Lane Laguna Hills, CA 92633	Apria Healthcare EVP, Sales Aggregate Year-to-date> $360.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00
Watson, Lisa M. 160 Trofello Lane Aliso Viejo, CA 92656	Apria Healthcare, Inc. H.P.P.Res.Devlpmnt Aggregate Year-to-date> $575.00 Bi-Weekly PR Deduction of... $25.00		Total this period	100.00
Hammond, Jeffrey A. 621 Gary Place Newport Beach, CA 92663	Apria Healthcare, Inc. Market Manager Aggregate Year-to-date> $345.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00

SUBTOTAL of Receipts This Page (Optional).....> $360.00

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

22037880160

SCHEDULE A — ITEMIZED RECEIPTS (Contributions from Individuals/ Persons Other Than Political Committees)

Use separate schedule(s) for each category of the Detailed Summary Page — PAGE 4 OF 6 — FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00280212

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
Hargis, Dwayne A. 8131 White Alder Court Avon, IN 46123	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $1,035.00 Bi-Weekly PR Deduction of...	$45.00	Total this period	180.00
Higby, Lawrence K. 218 Via Lido Nord Newport Beach, CA 92663	Apria Healthcare, Inc. President and CEO Aggregate Year-to-date> $920.00 Bi-Weekly PR Deduction of...	$40.00	Total this period	160.00
Holcombe, Robert S. 28 Oakbrook Drive Coco de Caia, CA 92679	Apria Healthcare, INC. Sr. Vice President Aggregate Year-to-date> $920.00 Bi-Weekly PR Deduction of...	$40.00	Total this period	160.00
Howard, Joseph M. 3846 Broadview Place Castlerock, CO 80109	Apria Healthcare, Inc. Region Accounts Mgr. Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of...	$10.00	Total this period	40.00
Neet, Janet L. 22122 Millwater Mission Viejo, CA 92692	Apria Healthcare, Inc. Director, IS Support Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of...	$10.00	Total this period	40.00

SUBTOTAL of Receipts This Page (Optional) ..... > $580.00

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

22037880161

SCHEDULE A — ITEMIZED RECEIPTS (Contributions from Individuals/ Persons Other Than Political Committees)

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

PAGE 5 OF 8

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00340218

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
Karsen, Michael J. 13325 Winstanley San Diego, CA 92130	Apria Healthcare, Inc. E.V.P. Business Ops Aggregate Year-to-Date: $884.58 Bi-Weekly PR Deduction of... $38.46		Total this period	153.84
King, Diane M. 4882 Staten Drive Jackson, NY 40202	Apria Healthcare, Inc. Branch Manager Aggregate Year-to-Date: $280.00 Bi-Weekly PR Deduction of... $20.00		Total this period	40.00
Lamberg, Kelly J. 25993 Rock Springs Circle Laguna Hills, CA 92653	Apria Healthcare, Inc. V.P., Sales Planning Aggregate Year-to-Date: $595.00 Bi-Weekly PR Deduction of... $35.00		Total this period	140.00
Nikols, Steve 11915 Shooting Club Road Raleigh, NC 27500	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-Date: $2,050.00 Bi-Weekly PR Deduction of... $50.00		Total this period	200.00
Hilse, Timothy W. 3765 Del Vista St. Louis, MO 63126	Apria Healthcare, Inc. Regional V.P., Sales Aggregate Year-to-Date: $230.00 Bi-Weekly PR Deduction of... $10.00		Total this period	40.00

SUBTOTAL of Receipts This Page (Optional)..... 573.84

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

SCHEDULE A

ITEMIZED RECEIPTS
(Contributions from Individuals/
Persons Other Than Political Committees)

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

PAGE 6 OF 8
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00340218

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
Nonast, William B. 3 Barbara Way Lincoln, RI 02865	Apria Healthcare, Inc. Division V.P., Ops Aggregate Year-to-date> $575.00 Bi-Weekly PR Deduction of... $25.00		Total this period	100.00
Mosser, Richard Clark 209 Fencroft Road Broomall, PA 19008	Apria Healthcare Director, APN Aggregate Year-to-date> $575.00 Bi-Weekly PR Deduction of... $25.00		Total this period	100.00
O'Donnell, Patrick D. 167 Maybury Road Colchester, VT 05446	Apria Healthcare, Inc. Branch Manager Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00		Total this period	40.00
Rickman, Robert R. 9308 Ranworth Way Raleigh, NC 27615	Apria Healthcare, Inc. Division V.P., Ops Aggregate Year-to-date> $920.00 Bi-Weekly PR Deduction of... $40.00		Total this period	160.00
Salley, Tami 304 Oak Ridge Drive Venezia, PA 15367	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $345.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00

SUBTOTAL of Receipts This Page (optional).....> $460.00

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

22037880163

SCHEDULE A — ITEMIZED RECEIPTS (Contributions from Individuals/ Persons Other Than Political Committees)

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

PAGE 7 OF 8

FOR LINE NUMBER 11(a)(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)

APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00280213

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date		Date (month, day, year)	Amount of Each Receipt this Period
SEARS, David C. 119 Cobham Lane Road Cabot, PA 16023	Apria Healthcare, Inc. Branch Manager Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00		Total this period	40.00
Seauck, Daniel J. 3185 Shelter Cove Lane Elk Grove, CA 95758	Apria Healthcare, Inc. Division V.P., Ops Aggregate Year-to-date> $575.00 Bi-Weekly PR Deduction of... $25.00		Total this period	100.00
Thompson, Andrew C. 7 Cottonberry Court The Woodlands, TX 77384	Apria Healthcare, Inc. Regional V.P., Ops Aggregate Year-to-date> $475.00 Bi-Weekly PR Deduction of... $25.00		Total this period	100.00
Underwood, Barbara 870 Oakwood Court Palatine, IL 60067	Apria Healthcare, Inc. District Manager Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00		Total this period	40.00
Wagner, Andrew 870 Carson Court Carmel, IN 46033	Apria Healthcare, Inc. Reg.Logistics Mgr. Aggregate Year-to-date> $245.00 Bi-Weekly PR Deduction of... $15.00		Total this period	60.00

SUBTOTAL of Receipts This Page (Optional)..... ...> $340.00

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

22037880164

SCHEDULE A — ITEMIZED RECEIPTS (Contributions From Individuals/ Persons Other Than Political Committees)

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

PAGE 9 OF 9

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00244218

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Malp, Bob A. 70 Elmwood Blvd. York, PA 17402	Apria Healthcare Corp. Accounts Mgr. Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00	Total this period	40.00
Warren, Mark E. 20502 Greenbrier Rd. Santa Ana, CA 92705	Apria Healthcare, Inc. Dir. Comp. & Benefit Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00	Total this period	40.00
Weiner, Mark A. 124 Barnett Drive Edwardsville, IL 62025	Apria Healthcare, Inc. Division V.P., Ops Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00	Total this period	40.00
Wolf, Linda 2944 Kinspointe Chesterfield, MO 63005	Apria Healthcare, Inc. Division V.P., Sales Aggregate Year-to-Date> $690.00 Bi-Weekly PR Deduction of... $30.00	Total this period	120.00
Zechner, Steven A. 1587 Whirlaway Court Neenah, WI 54956	Apria Healthcare, Inc. Branch Manager Aggregate Year-to-date> $230.00 Bi-Weekly PR Deduction of... $10.00	Total this period	40.00

SUBTOTAL of Receipts This Page (Optional) ..... > $280.00

TOTAL This Period (last page this line number only) ..... > $3,333.94

22037880165

SCHEDULE B

ITEMIZED DISBURSEMENTS
(Contributions to Federal Candidates/
Committees and Other Political Committees

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

PAGE 1 OF 1
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
APRIA HEALTHCARE, INC. POLITICAL ACTION COMMITTEE C00240232

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Disburse. For:	Date (month, day, year)	Amount of Each Disbursement This Period
Crossley Committee P.O. Box 1080 521 E. Locust, 2nd Floor Des Moines, IA 50309	Senate Candidate, Iowa	General 2002	10-25-2002	1,000.00

SUBTOTAL of Disbursements This Page (optional) $1,000.00

TOTAL This Period (last page this line number only) $1,000.00

22037880166

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 (R/C) 12-3-02
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

dmto — PREPARER

12-8-02 — DATE PREPARED

(6/2000)