23037964153

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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. — 12FB4M5

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

ADDRESS (number and street) ▼ 7350 VAN DUSEN ROAD SUITE 450

Check if different than previously reported. (ACC)

LAUREL | MD | 20707-

2. FEC IDENTIFICATION NUMBER ▼ C00238204

CITY ▲ | STATE ▲ | ZIP CODE ▲

3. IS THIS REPORT X 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) X	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 _____ In the State of _____

5. Covering Period 11 26 2002 through 12 31 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 PARVEZ SHAH, MD.

Signature of Treasurer _____ Date 01 30 2003

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)

FE-AN542.PDF

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

Report Covering the Period: From: 11 26 2002 To: 12 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		204406
(b) Cash on Hand at Beginning of Reporting Period	543893	
(c) Total Receipts (from Line 19)	155064	3490211
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	698957	3694617
7. Total Disbursements (from Line 30)	83621	3079281
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	615336	615336
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	

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 1/01)

Write or Type Committee Name

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

Report Covering the Period: From: 11 26 2002 To: 12 31 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)	1550.00	
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	1550.00	34898.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	1550.00	34898.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 38, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	0.64	4.11
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	1550.64	34902.11
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	1550.64	34902.11

DETAILED SUMMARY PAGE
of Disbursements

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	83621	2209281
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	83621	2209281
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	8700000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	83621	3079281
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	83621	3079281

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	155000	3489800
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	155000	3489800
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	83621	2209281
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	83621	2209281

23037964157

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 1 OF 1

☐ 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)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A. Full Name (Last, First, Middle Initial): SOLOMON SMITH BARNEY
Mailing Address: 200 CRESCENT CT
City: DALLAS State: TX Zip Code: 75201
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☒ Other (specify): DIVIDENDS
Aggregate Year-to-Date: 9.11
Date of Receipt: 12 / 31 / 2002
Amount of Each Receipt this Period: 0.64

B. Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify):
Aggregate Year-to-Date:
Date of Receipt:
Amount of Each Receipt this Period:

C. Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify):
Aggregate Year-to-Date:
Date of Receipt:
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) 0.64

TOTAL This Period (last page this line number only) 0.64

23037964158

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 1 OF 4
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A. Full Name (Last, First, Middle Initial)
RATHORE, PERVEEN

Mailing Address
5 ARROWHEAD LN,

City WESTBORO State MA Zip Code 01581

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES

Aggregate Year-to-Date 300.00

Date of Receipt 12 / 09 / 2002

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
AGHA, ARIF

Mailing Address 412 ST. MARKS CT

City OAKBROOK State IL Zip Code 60523

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES

Aggregate Year-to-Date 100.00

Date of Receipt 12 / 09 / 2002

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
AKBAR, RANA W

Mailing Address 4701 TOWNE CENTRE, #304

City SAGINAW State MI Zip Code 48604

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date 200.00

Date of Receipt 12 / 09 / 2002

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 500.00

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

23037964159

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 2 OF 4
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A. Full Name (Last, First, Middle Initial) GILANI, DURDANA
Mailing Address 5605 BURNING TREE DR
City LACANADA State CA Zip Code 91011
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 250.00
Date of Receipt 12 09 2002
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial) FAROOQI, MOHAMMAD
Mailing Address 3900 JOE RAMSEY BLVD
City GREENVILLE State TX Zip Code 75401
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 12 09 2002
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial) BANGASH, JAVED
Mailing Address 6 YORKTOWN CT
City SOUTH BARRINGTON State IL Zip Code 60010
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 12 09 2002
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 3 OF 4
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): QAYYUM, IJAZ
Mailing Address: 820 LAKEVIEW LN
City: BURR RIDGE State: IL Zip Code: 60527
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): ZEB, MOHIUDIN
Mailing Address: 3900 JOE RAMSEY BLVD, #7
City: GREENVILLE State: TX Zip Code: 75401
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): MALIK, HUSSAIN
Mailing Address: 296 EAST BROWN ST
City: EAST STROUDSBURG State: PA Zip Code: 18301
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 185.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 5,000.00

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

23037964161

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 4 OF 4
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A. Full Name (Last, First, Middle Initial): SADIQ, SYED A
Mailing Address: 14333 LAUREL BOWIE ROAD, #208
City: LAUREL State: MD Zip Code: 20708
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☒ Other (specify): DUES
Aggregate Year-to-Date: 200.00
Date of Receipt: 12 / 09 / 2002
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify):
Aggregate Year-to-Date:
Date of Receipt:
Amount of Each Receipt this Period:

C. Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify):
Aggregate Year-to-Date:
Date of Receipt:
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 100.00

TOTAL This Period (last page this line number only) ▶ 1550.00

23037964162

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): VERIZON
Mailing Address: P O BOX 17577
City: BALTIMORE State: MD Zip Code: 21297
Purpose of Disbursement: Telephone
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 13 2002
Amount of Each Disbursement This Period: 58 68

B.
Full Name (Last, First, Middle Initial): M C I
Mailing Address: 601 12th. Street S
City: ARLINGTON State: VA Zip Code: 22206
Purpose of Disbursement: Telephone
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 13 2002
Amount of Each Disbursement This Period: 29 53

C.
Full Name (Last, First, Middle Initial): P S DATA
Mailing Address: 309 A HOWARD AVE
City: ROCKVILLE State: MD Zip Code: 20850
Purpose of Disbursement: Office supplies
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 27 2002
Amount of Each Disbursement This Period: 168 00

SUBTOTAL of Disbursements This Page (optional) ▶ 256 21

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

23037964163

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): HUTCHINSON, JOAN
Mailing Address: P.O. BOX 14044
City: SILVER SPRING State: MD Zip Code: 20911
Purpose of Disbursement: SECRETARIAL SERVICES
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 7 / 26 / 2002
Amount of Each Disbursement this Period: 3100.00

B.
Full Name (Last, First, Middle Initial): HUTCHINSON, JOAN
Mailing Address: P O BOX 14044
City: SILVER SPRING State: MD Zip Code: 20911
Purpose of Disbursement: SECRETARIAL SERVICES
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2002
Amount of Each Disbursement this Period: 27000

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement:
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 580.00

TOTAL This Period (last page this line number only) ▶ 8621

23037964164

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 1/30/03
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	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	

JR
PREPARER

2/5/03
DATE PREPARED

(5/2000)