12/05/2002 15 : 51

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 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 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 (M13)

(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 **P**ost -Election Report for the: X General (30G) Runoff (30R) Special (30S)

Election on 11 05 2002 in the State of MO

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 James R. Bowlin

Signature of Treasurer Electronically Filed by James R. Bowlin Date 12 05 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 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

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

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		91253.83
(b) Cash on Hand at Begining of Reporting Period	59354.33	
(c) Total Receipts (from Line 19)	22314.00	144914.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	81668.33	236168.33
7. Total Disbursements (from Line 30)	23450.00	177950.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	58218.33	58218.33
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 (Revised 1/2001)

Write or Type Committee Name

American Association of Orthodontists Political Action Committee

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)	6789.00	
(ii) Unitemized	15525.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	22314.00	144914.50
(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) ..... ▶	22314.00	144914.50
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	0.00
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) ..... ▶	22314.00	144914.50
20. Total Federal Receipts (subtract Line 18 from Line 19) ..... ▶	22314.00	144914.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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	23250.00	177750.00
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	200.00	200.00
(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)) ▶	200.00	200.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	23450.00	177950.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	23450.00	177950.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	22314.00	144914.50
33. Total Contribution Refunds (from Line 28(d))	200.00	200.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	22114.00	144714.50
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 / 24

[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. Kevin Jay Andrews
Mailing Address: 2716 Sun Chaser Ct
City: Reno State: NV Zip Code: 89511
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 399.00
Date of Receipt: 10 14 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10375

B.
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.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10325

C.
Full Name (Last, First, Middle Initial): Dr. Steven S. Banks
Mailing Address: 277 Forest Ave
City: Glen Ellyn State: IL Zip Code: 60137
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10318

SUBTOTAL of Receipts This Page (optional) ..... ▶ **500.00**

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: (check only one) PAGE 6 / 24

[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. Hendrik F. Blom
Mailing Address: 9716 Weddington Cir
City: Granite Bay State: CA Zip Code: 95746
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt: 10 18 2002
Amount of Each Receipt this Period: 250.00
Credit Card
Transaction ID: R10380

B.
Full Name (Last, First, Middle Initial): Dr. Gregory M. Bookwalter
Mailing Address: 29 Otterbein Ct
City: Lexington State: OH Zip Code: 44904
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 18 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10408

C.
Full Name (Last, First, Middle Initial): Dr. Christopher M. Brieden
Mailing Address: 700 N Riverside
City: St Clair State: MI Zip Code: 48079
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10422

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: (check only one) PAGE 7 / 24

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

A.
Full Name (Last, First, Middle Initial): Dr. Clark C. Browne
Mailing Address: 2341 Morning Star Dr
City: Birmingham State: AL Zip Code: 35216
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10353

B.
Full Name (Last, First, Middle Initial): Dr. S. Grayson Eddy, Jr.
Mailing Address: 5148 Buckhead Trail
City: Knoxville State: TN Zip Code: 37919
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 362.50
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 180.00
Credit Card
Transaction ID: R10313

C.
Full Name (Last, First, Middle Initial): Dr. Earle E. Edwards, III
Mailing Address: 325 E Del Monte Ave P O Box 696
City: Clewiston State: FL Zip Code: 33440
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10442

SUBTOTAL of Receipts This Page (optional) ..... ▶ **580.00**

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: (check only one) PAGE 8 / 24

[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. 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.
Name of Employer: Self-Employed — Occupation: Orthodontist
Receipt For: 2002 — Primary — X General — Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10441

B.
Full Name (Last, First, Middle Initial): Dr. Robert W. Fry
Mailing Address: 12340 Pflumm Road
City: Olathe — State: KS — Zip Code: 66062
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed — Occupation: Orthodontist
Receipt For: 2002 — Primary — X General — Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10318

C.
Full Name (Last, First, Middle Initial): Dr. Debra Williams George
Mailing Address: 180 Read St
City: Seekonk — State: MA — Zip Code: 02771
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed — Occupation: Orthodontist
Receipt For: 2002 — Primary — X General — Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10349

SUBTOTAL of Receipts This Page (optional) ..... ▶ **600.00**

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: (check only one) PAGE 9 / 24

[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. Raymond George, Jr.
Mailing Address: 130 Read St
City: Seekonk State: MA Zip Code: 02771
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10348

B.
Full Name (Last, First, Middle Initial): Dr. Jeffrey L. Gilmore
Mailing Address: 304 Flintwood Dr
City: Marietta State: OH Zip Code: 45750
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 11 08 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10455

C.
Full Name (Last, First, Middle Initial): Dr. Lawrence S. Harris
Mailing Address: 27 Westmount Dr
City: Livingston State: NJ Zip Code: 07039
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10317

SUBTOTAL of Receipts This Page (optional) ..... ▶ **600.00**

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: (check only one) PAGE 10 / 24

[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. M. Donald Hayes
Mailing Address: 737 Timberlane
City: Wilmington State: OH Zip Code: 45177
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10459

B.
Full Name (Last, First, Middle Initial): Dr. Dennis C. Hiller
Mailing Address: 57 Pollard St PO Box 1539
City: Conway State: NH Zip Code: 03818
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt: 10 28 2002
Amount of Each Receipt this Period: 500.00
Check
Transaction ID: R10448

C.
Full Name (Last, First, Middle Initial): Dr. Gregg G. Hipple
Mailing Address: 9280 Grey Cloud Island Dr
City: St Paul Park State: MN Zip Code: 55071
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt: 10 18 2002
Amount of Each Receipt this Period: 210.00
Check
Transaction ID: R10411

SUBTOTAL of Receipts This Page (optional) ..... ▶ **910.00**

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: (check only one) PAGE 11 / 24

[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. A. Page Jacobson
Mailing Address: 3839 NW 48th Pl
City: Gainesville State: FL Zip Code: 32606
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10446

B.
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.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 250.00
Check
Transaction ID: R10356

C.
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.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 100.00
Credit Card
Transaction ID: R10414

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: (check only one) PAGE 12 / 24

[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 M. Lebsack
Mailing Address: 4710 Woodfield Dr
City: Saint Joseph State: MO Zip Code: 64506
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10326

B.
Full Name (Last, First, Middle Initial): Dr. W. Bonham Magness
Mailing Address: 12211 Perthshire
City: Houston State: TX Zip Code: 77024
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10329

C.
Full Name (Last, First, Middle Initial): Dr. George E. Mayo, III
Mailing Address: 607 Brookwood Ln
City: Goldsboro State: NC Zip Code: 27530
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10462

SUBTOTAL of Receipts This Page (optional) ..... ▶ **300.00**

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: (check only one) PAGE 13 / 24

[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. Ernest S. Melamson

Mailing Address
37 Chiltern Hill Dr Worth

City: Worcester State: MA Zip Code: 01609

FEC ID number of contributing federal political committee.

Name of Employer: Self-Employed
Occupation: Orthodontist

Receipt For: 2002
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 06 2002

Amount of Each Receipt this Period: 100.00

Credit Card

Transaction ID: R10457

B. Full Name (Last, First, Middle Initial)
Dr. Thomas J. Melcher

Mailing Address
810 Flatirons Ct

City: Louisville State: CO Zip Code: 80027

FEC ID number of contributing federal political committee.

Name of Employer: Self-Employed
Occupation: Orthodontist

Receipt For: 2002
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 18 2002

Amount of Each Receipt this Period: 200.00

Check

Transaction ID: R10405

C. 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.

Name of Employer: Self-Employed
Occupation: Orthodontist

Receipt For: 2002
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 29 2002

Amount of Each Receipt this Period: 200.00

Credit Card

Transaction ID: R10420

SUBTOTAL of Receipts This Page (optional) ..... ▶ **500.00**

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: (check only one) PAGE 14 / 24

[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. Donald J. Neely
Mailing Address: 48 Douglas Hill
City: Norwich State: VT Zip Code: 05055
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 398.00
Date of Receipt: 10 14 2002
Amount of Each Receipt this Period: 199.00
Check
Transaction ID: R10373

B.
Full Name (Last, First, Middle Initial): Dr. David A. Paolini
Mailing Address: 250 Buford Avenue
City: Gettysburg State: PA Zip Code: 17325
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10447

C.
Full Name (Last, First, Middle Initial): Dr. Michael J. Riccio
Mailing Address: 4 Fille St
City: Ipswich State: MA Zip Code: 01938
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10430

SUBTOTAL of Receipts This Page (optional) ..... ▶ 499.00

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. Loring L. Ross
Mailing Address: 212 B1st Ave N
City: Myrtle Beach State: SC Zip Code: 29572
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Check
Transaction ID: R10350

B.
Full Name (Last, First, Middle Initial): Dr. Michael G. Steinberg
Mailing Address: 33 Rippling Brook Dr
City: Short Hills State: NJ Zip Code: 07078
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10314

C.
Full Name (Last, First, Middle Initial): Dr. David V. Tillmanns
Mailing Address: 5746 Country Club Pkwy
City: San Jose State: CA Zip Code: 95136
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10335

SUBTOTAL of Receipts This Page (optional) ..... ▶ **500.00**

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. Scott Patrick Werner
Mailing Address: 1468 Stonegate Pass
City: Germantown State: TN Zip Code: 38138
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 10 29 2002
Amount of Each Receipt this Period: 200.00
Credit Card
Transaction ID: R10423

B.
Full Name (Last, First, Middle Initial): Dr. Don M. Wilkins
Mailing Address: 880 Indianola Dr
City: Merritt Island State: FL Zip Code: 32952
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10467

C.
Full Name (Last, First, Middle Initial): Dr. David S. Williams
Mailing Address: 2540 Antrim Cir
City: Columbia State: TN Zip Code: 38401
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Orthodontist
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 10 08 2002
Amount of Each Receipt this Period: 100.00
Check
Transaction ID: R10332

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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[ ] 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. Marian Schmitt Wolford

Mailing Address
638 W 6th St

City: Erie
State: PA
Zip Code: 16507

FEC ID number of contributing federal political committee.

Name of Employer: Self-Employed
Occupation: Orthodontist

Receipt For: 2002
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 29 2002

Amount of Each Receipt this Period: 200.00

Check

Transaction ID: R10445

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**200.00**
TOTAL This Period (last page this line number only) ..... ▶	**6789.00**

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

A.
Full Name (Last, First, Middle Initial)
Kirk for Congress

Mailing Address
PO BOX 8
City: Winnetka | State: IL | Zip Code: 60093

Purpose of Disbursement
Contribution: Mark Steven Kirk (IL-10-R)

Candidate Name
Mark Steven Kirk (IL-10-R)

Category/Type

Office Sought: X House / Senate / President
State: IL District: 10

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 1500.00

Contribution: Mark Steven Kirk (IL-10-R)

Transaction ID: D541

B.
Full Name (Last, First, Middle Initial)
Team Sununu

Mailing Address
PO Box 500
City: Rye | State: NH | Zip Code: 03870

Purpose of Disbursement
Contribution: John Sununu (NH-??-R)

Candidate Name
John Sununu (NH-??-R)

Category/Type

Office Sought: House / X Senate / President
State: NH District: 0

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 2500.00

Contribution: John Sununu (NH-??-R)

Transaction ID: D542

C.
Full Name (Last, First, Middle Initial)
Greenwood for Congress

Mailing Address
115 North Broad Street PO Box 2358
City: Doylestown | State: PA | Zip Code: 18901

Purpose of Disbursement
Contribution: James C. Greenwood (PA-8-R

Candidate Name
James C. Greenwood (PA-8-R)

Category/Type

Office Sought: X House / Senate / President
State: PA District: 8

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: James C. Greenwood (PA-8-R)

Transaction ID: D543

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

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

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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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

A.
Full Name (Last, First, Middle Initial)
Forrester for Senate

Mailing Address
3535 Quakerbridge Road Suite 400
City: Hamilton State: NJ Zip Code: 08619

Purpose of Disbursement
Contribution: Douglas Forrester (NJ-??-R

Candidate Name
Douglas Forrester (NJ-??-R)

Category/Type

Office Sought: House / X Senate / President
State: NJ District: 0

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 2000.00

Contribution: Douglas Forrester (NJ-??-R)

Transaction ID: D544

B.
Full Name (Last, First, Middle Initial)
Gekas for Congress

Mailing Address
PO Box 5875
City: Harrisburg State: PA Zip Code: 17110

Purpose of Disbursement
Contribution: George W. Gekas (PA-17-R)

Candidate Name
George W. Gekas (PA-17-R)

Category/Type

Office Sought: X House / Senate / President
State: PA District: 17

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: George W. Gekas (PA-17-R)

Transaction ID: D546

C.
Full Name (Last, First, Middle Initial)
Gerlach for Congres

Mailing Address
631 N. Pottstown Pike
City: Exton State: PA Zip Code: 19341

Purpose of Disbursement
Contribution: James Gerlach (PA-6-R)

Candidate Name
James Gerlach (PA-6-R)

Category/Type

Office Sought: X House / Senate / President
State: PA District: 6

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 250.00

Contribution: James Gerlach (PA-6-R)

Transaction ID: D547

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3250.00**

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

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

A.
Full Name (Last, First, Middle Initial)
Hayes for Congress

Mailing Address
PO Box 2000
City: Concord State: NC Zip Code: 28026

Purpose of Disbursement
Contribution: Robin Hayes (NC-8-R)

Candidate Name
Robin Hayes (NC-8-R)

Category/Type

Office Sought: X House / Senate / President
State: NC District: 8

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 31 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: Robin Hayes (NC-8-R)

Transaction ID: D54B

B.
Full Name (Last, First, Middle Initial)
Janklow for Congress

Mailing Address
PO Box 1151
City: Pierre State: SD Zip Code: 57501

Purpose of Disbursement
Contribution: William Janklow (SD-1-R)

Candidate Name
William Janklow (SD-1-R)

Category/Type

Office Sought: X House / Senate / President
State: SD District: 1

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 31 2002

Amount of Each Disbursement this Period: 1000.00

Contribution: William Janklow (SD-1-R)

Transaction ID: D55D

C.
Full Name (Last, First, Middle Initial)
John Kline for Congress

Mailing Address
14101 Southcross Dr W Suite 175
City: Burnsville State: MN Zip Code: 55337

Purpose of Disbursement
Contribution: John Kline (MN-2-R)

Candidate Name
John Kline (MN-2-R)

Category/Type

Office Sought: X House / Senate / President
State: MN District: 2

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 31 2002

Amount of Each Disbursement this Period: 250.00

Contribution: John Kline (MN-2-R)

Transaction ID: D552

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2250.00**

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

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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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

A. Full Name (Last, First, Middle Initial)
Anne Northup for Congress

Mailing Address
PO Box 7313
City: Louisville State: KY Zip Code: 40257

Purpose of Disbursement
Contribution: Anne Meagher Northup (KY-3

Candidate Name
Anne Meagher Northup (KY-3-R)

Category/Type
Contribution: Anne Meagher Northup (KY-3-R)

Office Sought: X House / Senate / President
State: KY District: 3

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 500.00

Transaction ID: D553

B. Full Name (Last, First, Middle Initial)
Nussle for Congress

Mailing Address
PO Box 324
City: Manchester State: IA Zip Code: 52057

Purpose of Disbursement
Contribution: Jim Nussle (IA-2-R)

Candidate Name
Jim Nussle (IA-2-R)

Category/Type
Contribution: Jim Nussle (IA-2-R)

Office Sought: X House / Senate / President
State: IA District: 2

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 500.00

Transaction ID: D554

C. Full Name (Last, First, Middle Initial)
Pearce for Congress

Mailing Address
151 S. Solano Suite E
City: Las Cruces State: NM Zip Code: 88001

Purpose of Disbursement
Contribution: Steve Pearce (NM-2-R)

Candidate Name
Steve Pearce (NM-2-R)

Category/Type
Contribution: Steve Pearce (NM-2-R)

Office Sought: X House / Senate / President
State: NM District: 2

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement: 10 / 31 / 2002

Amount of Each Disbursement this Period: 250.00

Transaction ID: D555

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1250.00**

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

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

A.
Full Name (Last, First, Middle Initial)
Porter for Congress

Mailing Address
7530 West Sahara Avenue Suite 101
City: Las Vegas State: NV Zip Code: 89117

Purpose of Disbursement
Contribution: Jon Porter (NV-2-R)

Candidate Name
Jon Porter (NV-2-R)

Category/Type

Office Sought: X House / Senate / President
State: NV District: 2

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 31 2002

Amount of Each Disbursement this Period
250.00

Contribution: Jon Porter (NV-2-R)

Transaction ID: D556

B.
Full Name (Last, First, Middle Initial)
Raye for Congress

Mailing Address
PO Box 1776
City: Bangor State: ME Zip Code: 04402

Purpose of Disbursement
Contribution: Kevin Raye (ME-2-R)

Candidate Name
Kevin Raye (ME-2-R)

Category/Type

Office Sought: X House / Senate / President
State: ME District: 2

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 31 2002

Amount of Each Disbursement this Period
250.00

Contribution: Kevin Raye (ME-2-R)

Transaction ID: D557

C.
Full Name (Last, First, Middle Initial)
Cornyn for Senate, Inc.

Mailing Address
P.O. Box 13026
City: Austin State: TX Zip Code: 78711

Purpose of Disbursement
Contribution: John Cornyn (TX-??-R)

Candidate Name
John Cornyn (TX-??-R)

Category/Type

Office Sought: House / X Senate / President
State: TX District: 0

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 31 2002

Amount of Each Disbursement this Period
2000.00

Contribution: John Cornyn (TX-??-R)

Transaction ID: D558

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

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

A.
Full Name (Last, First, Middle Initial)
Wayne Allard for United States Senate Committee

Mailing Address
PO Box 32
City: Loveland
State: CO
Zip Code: 80539

Purpose of Disbursement
Contribution: Wayne Allard (CO-R)

Candidate Name
Wayne Allard (CO-R)

Category/Type
Contribution: Wayne Allard (CO-R)

Office Sought: House / X Senate / President
State: CO District: 0

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 31 2002

Amount of Each Disbursement this Period
4000.00

Transaction ID: D559

B.
Full Name (Last, First, Middle Initial)
Suzanne Haik Terrell for US Senate Campaign

Mailing Address
PO Box 44298
City: Baton Rouge
State: LA
Zip Code: 70804

Purpose of Disbursement
Contribution: Suzanne Haik Terrell (LA-7

Candidate Name
Suzanne Haik Terrell (LA-??-R)

Category/Type
Contribution: Suzanne Haik Terrell (LA-??-R)

Office Sought: House / X Senate / President
State: LA District: 0

Disbursement For: 2002
Primary / General / Other (specify)
Special General

Date of Disbursement
11 19 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: D563

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **9000.00**

TOTAL This Period (last page this line number only) ..... ▶ **23250.00**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for 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)
E. Engel

Mailing Address
153 Bayou Rd
City: Greenville State: MS Zip Code: 38701

Purpose of Disbursement
Refund to Individual

Candidate Name

Office Sought: House / Senate / President
State: District:

Disbursement For: 2002
Primary / General / X Other (specify) ▼
Other

Category/Type
Refund to Individual

Date of Disbursement
10 08 2002

Amount of Each Disbursement this Period
100.00

Transaction ID: D560

B.
Full Name (Last, First, Middle Initial)
Randall Moles

Mailing Address
1833 S Main St
City: Racine State: WI Zip Code: 53403

Purpose of Disbursement
Refund to Individual

Candidate Name

Office Sought: House / Senate / President
State: District:

Disbursement For: 2002
Primary / General / X Other (specify) ▼
Other

Category/Type
Refund to Individual

Date of Disbursement
10 08 2002

Amount of Each Disbursement this Period
100.00

Transaction ID: D561

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **200.00**

TOTAL This Period (last page this line number only) ..... ▶ **200.00**