

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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Office Use Only
FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
 AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

ADDRESS (number and street) 555 East Wells Street, Suite 1100
 Check if different than previously reported. (ACC)
 Milwaukee WI 53202 3823

2. FEC IDENTIFICATION NUMBER C00324780
 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 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 (YE)
 (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 Post-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
 Election on _____ in the State of _____

5. Covering Period 07 01 2011 through 12 31 2011

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 Dr. William R. Little, MD
 Signature of Treasurer *Dr. William R. Little* Date 01 18 2012

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

12030720211

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period: From:

M M	D D	Y Y Y Y
0 7	0 1	2 0 1 1

 To:

M M	D D	Y Y Y Y
1 2	3 1	2 0 1 1

12030720212

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 1 1</td></tr></table>	Y Y Y Y	2 0 1 1		216614.44
Y Y Y Y				
2 0 1 1				
(b) Cash on Hand at Beginning of Reporting Period	226398.85			
(c) Total Receipts (from Line 19)	12110.46	22248.87		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	238509.31	238863.31		
7. Total Disbursements (from Line 31)	6100.00	6454.00		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	232409.31	232409.31		
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 (Rev. 02/2003)

Page 3

Write or Type Committee Name

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	W	Y
2	0	1	1

 To:

M	M
1	2

D	D
3	1

Y	Y	W	Y
2	0	1	1

12030720213

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)	1500.00	1750.00
(ii) Unitemized	9975.00	19095.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11475.00	20845.00
(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 33, page 5)	11475.00	20845.00
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 37, page 5)	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.)	635.46	1403.87
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12110.46	22248.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12110.46	22248.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

12030720214

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.....	100.00	454.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	100.00	454.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	6000.00	6000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6100.00	6454.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	6100.00	6454.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11475.00	20845.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11475.00	20845.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	100.00	454.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100.00	454.00

12030720215

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 11

(check only one)

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 ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey D Anderson

Mailing Address 1305 County Road 65

City State Zip Code
Killen AL 35645

FEC ID number of contributing federal political committee. C

Name of Employer
Eliza Coffee Memorial Hos-
pital

Occupation
Doctor

Receipt For:

Primary General
 Other (specify)▼

Aggregate Year-to-Date▼

250.00

Date of Receipt

MM / DD / YYYY
12 / 31 / 2011

Transaction ID: SA11A1.4420

Amount of Each Receipt this Period

250.00

Individual Contributions
over \$200

Full Name (Last, First, Middle Initial)

B. Jonethan DeLaughter

Mailing Address 1534 Castle Ct

City State Zip Code
Houston TX 77006

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)▼

Aggregate Year-to-Date▼

200.00

Date of Receipt

MM / DD / YYYY
12 / 31 / 2011

Transaction ID: SA11A1.4422

Amount of Each Receipt this Period

200.00

Individual Contributions
over \$200

Full Name (Last, First, Middle Initial)

C. Jonathan Grayzel

Mailing Address 95 Sawyer Road
Suite 120

City State Zip Code
Waltham MA 02453-3471

FEC ID number of contributing federal political committee. C

Name of Employer
UPTODATE, INC.

Occupation

Receipt For:

Primary General
 Other (specify)▼

Aggregate Year-to-Date▼

200.00

Date of Receipt

MM / DD / YYYY
12 / 31 / 2011

Transaction ID: SA11A1.4425

Amount of Each Receipt this Period

200.00

Individual Contributions
over \$200

SUBTOTAL of Receipts This Page (optional) ▶

650.00

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

12030720216

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 / 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

A. Full Name (Last, First, Middle Initial)
 Donald Janes
 Mailing Address 48 Tyler Ct
 City State Zip Code
 Evington VA 24550-3718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lynchburg General Hospital
 Receipt For:
 Primary General
 Other (specify)▼
 Aggregate Year-to-Date▼
 200.00

Date of Receipt
 12 / 31 / 2011
 Transaction ID: SA11A1.4426
 Amount of Each Receipt this Period
 200.00
 Individual Contributions over \$200

B. Full Name (Last, First, Middle Initial)
 Lenard Kerr
 Mailing Address 15149 NE 29th St
 City State Zip Code
 Cambridge IA 50046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify)▼
 Aggregate Year-to-Date▼
 200.00

Date of Receipt
 12 / 31 / 2011
 Transaction ID: SA11A1.4428
 Amount of Each Receipt this Period
 200.00
 Individual Contributions over \$200

C. Full Name (Last, First, Middle Initial)
 James Mensching
 Mailing Address 14 Bates Lane
 City State Zip Code
 Cohasset MA 02025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 South Shore Hospital
 Receipt For:
 Primary General
 Other (specify)▼
 Aggregate Year-to-Date▼
 250.00

Date of Receipt
 12 / 31 / 2011
 Transaction ID: SA11A1.4430
 Amount of Each Receipt this Period
 250.00
 Individual Contributions over \$200

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**
TOTAL This Period (last page this line number only) ▶

12030720217

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 / 11

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. Heather Murphy-Lavoie

Mailing Address 419 Cherokee Street

City

New Orleans

State

LA

Zip Code

70118

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)▼

Aggregate Year-to-Date▼

200.00

Date of Receipt

MM / DD / YYYY
12 / 31 / 2011

Transaction ID: SA11A1.4432

Amount of Each Receipt this Period

200.00

Individual Contributions over \$200

12030720218

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

1500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 / 11

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial)

A. Capital One Direct Bank

Mailing Address PO Box 4197

City

Houston

State

TX

Zip Code

77210-4197

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1392.04

Date of Receipt

12 / 31 / 2011

Transaction ID: SA17.4435

Amount of Each Receipt this Period

628.00

Interest from account

12030720219

SUBTOTAL of Receipts This Page (optional)

628.00

TOTAL This Period (last page this line number only)

628.00

**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)

PAGE 10 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial) A. Linda Elam		Transaction ID: SB29.4444 Date of Disbursement	
Mailing Address 3005 S. Waterford Ct.		MM / DD / YYYY 11 / 08 / 2011	
City Mt. Juliet	State TN	Zip Code 37122	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011 Category/ Type	1000.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Jeremy Faison		Transaction ID: SB29.4440 Date of Disbursement	
Mailing Address 1009 Ctry Mtn Road		MM / DD / YYYY 11 / 08 / 2011	
City Cosby	State TN	Zip Code 37722	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011 Category/ Type	1000.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Jim Gotto		Transaction ID: SB29.4442 Date of Disbursement	
Mailing Address 5108 John Hagar Road		MM / DD / YYYY 11 / 08 / 2011	
City Hermitage	State TN	Zip Code 37076	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011 Category/ Type	1000.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

12030720220

**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 11 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Full Name (Last, First, Middle Initial) A. Mark Pody		Transaction ID: SB29.4446 Date of Disbursement MM / DD / YYYY 11 / 08 / 2011	
Mailing Address 401 West Main Suite 103		Amount of Each Disbursement this Period 1000.00	
City Lebanon State TN Zip Code 37087	Purpose of Disbursement Contribution Candidate Name Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dennis Powers		Transaction ID: SB29.4438 Date of Disbursement MM / DD / YYYY 11 / 08 / 2011	
Mailing Address P.O. Box 179		Amount of Each Disbursement this Period 1000.00	
City Jacksboro State TN Zip Code 37757	Purpose of Disbursement Contribution Candidate Name Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Cameron Sexton		Transaction ID: SB29.4436 Date of Disbursement MM / DD / YYYY 11 / 08 / 2011	
Mailing Address 186 Homestead Drive		Amount of Each Disbursement this Period 1000.00	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Contribution Candidate Name Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	6000.00

12030720221

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Exp* Shipping Date
1/19/12
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Amid

PREPARER
(3/2005)

1/27/12
DATE PREPARED

12030720222