07/12/2002 18 : 02

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

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

ADDRESS (number and street) ▼ 2025 M Street, N.W.

Suite 800

Check if different than previously reported. (ACC)

WASHINGTON | DC | 20036 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00325936

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)
- X 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 (12S)

Election on _____ in the State of _____

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

Election on _____ in the State of _____

5. Covering Period 01 01 1999 through 06 30 1999

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Robert Wilbur

Signature of Treasurer Electronically Filed by Mr. Robert Wilbur Date 07 01 1999

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
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

Report Covering the Period: From: 01 01 1999 To: 06 30 1999

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 1999		83728.72
(b) Cash on Hand at Begining of Reporting Period	83728.72	
(c) Total Receipts (from Line 19)	722.22	722.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84450.94	84450.94
7. Total Disbursements (from Line 30)	40754.64	40754.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43696.30	43696.30
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

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

Report Covering the Period: From: 01 01 1999 To: 06 30 1999

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)	0.00	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ..... ▶	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	722.22	722.22
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) ..... ▶	722.22	722.22
20. Total Federal Receipts (subtract Line 18 from Line 19) ..... ▶	722.22	722.22

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	1200.00	1200.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	1200.00	1200.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	39554.64	39554.64
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	40754.64	40754.64
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	40754.64	40754.64

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	0.00
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	0.00	0.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1200.00	1200.00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	1200.00	1200.00

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 / 19

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
GRASSLEY COMMITTEE

Mailing Address
PO BOX 1000

City: DES MOINES
State: IA
Zip Code: 50304

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

Receipt For:
Primary X General
Other (specify) ▼

Aggregate Year-to-Date ▼
722.22

Date of Receipt
06 30 1999

Amount of Each Receipt this Period
722.22

Refund for overcontribution in 1998

Transaction ID: SA16.65

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ **722.22**

TOTAL This Period (last page this line number only) ..... ▶ **722.22**

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)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
Smith, Bucklin & Associates

Mailing Address
2025 M Street, N.W., Suite 800
City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement
Accounting Fee

Candidate Name

Category/Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
02 01 1999

Amount of Each Disbursement this Period
200.00

Transaction ID: SB21B.72

B.
Full Name (Last, First, Middle Initial)
Smith, Bucklin & Associates

Mailing Address
2025 M Street, N.W., Suite 800
City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement
Accounting Fee

Candidate Name

Category/Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 01 1999

Amount of Each Disbursement this Period
200.00

Transaction ID: SB21B.73

C.
Full Name (Last, First, Middle Initial)
Smith, Bucklin & Associates

Mailing Address
2025 M Street, N.W., Suite 800
City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement
Accounting Fee

Candidate Name

Category/Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
04 01 1999

Amount of Each Disbursement this Period
200.00

Transaction ID: SB21B.74

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
Smith, Bucklin & Associates

Mailing Address
2025 M Street, N.W., Suite 800
City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement
Accounting Fee

Candidate Name

Category/Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
05 01 1999

Amount of Each Disbursement this Period
200.00

Transaction ID: SB21B.75

B.
Full Name (Last, First, Middle Initial)
Smith, Bucklin & Associates

Mailing Address
2025 M Street, N.W., Suite 800
City: Washington
State: DC
Zip Code: 20036

Purpose of Disbursement
Accounting Fee

Candidate Name

Category/Type

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

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
06 01 1999

Amount of Each Disbursement this Period
200.00

Transaction ID: SB21B.76

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **400.00**

TOTAL This Period (last page this line number only) ..... ▶ **1000.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR HARKIN

Mailing Address
P O BOX 811

City: DES MOINES | State: IA | Zip Code: 50304

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: IA District: 00

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

Date of Disbursement: 02 / 24 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.77

B. Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT LINDSEY GRAHAM

Mailing Address
P.O. BOX 1155 PO BOX 1155

City: SENECA | State: SC | Zip Code: 29679

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: SC District: 03

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

Date of Disbursement: 06 / 29 / 1999

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.79

C. Full Name (Last, First, Middle Initial)
COOKSEY FOR CONGRESS COMMITTEE

Mailing Address
P O BOX 7600

City: MONROE | State: LA | Zip Code: 71211

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: LA District: 05

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

Date of Disbursement: 02 / 23 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.28

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
ALFONSE M D'AMATO

Mailing Address
14 SOUTHARD DRIVE
City: ISLAND PARK State: NY Zip Code: 11559

Purpose of Disbursement
uncashed check voided

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: NY District: 00

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 01 04 1999

Amount of Each Disbursement this Period: -1445.36

Transaction ID: SB23.81

B.
Full Name (Last, First, Middle Initial)
DASHPAC

Mailing Address
424 C Street, N.E.
City: Washington State: DC Zip Code: 20002

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 06 15 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.15

C.
Full Name (Last, First, Middle Initial)
DAVE CAMP FOR CONGRESS 2000

Mailing Address
5915 EASTMAN AVENUE SUITE 100
City: MIDLAND State: MI Zip Code: 48640

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: MI District: 04

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

Date of Disbursement: 06 03 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.48

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **554.64**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
EHRLICH FOR CONGRESS COMMITTEE

Mailing Address
1301 YORK RD SUITE 705

City: LUTHERVILLE
State: MD
Zip Code: 21093

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: MD District: 02

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

Date of Disbursement: 05 05 1999

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.32

B.
Full Name (Last, First, Middle Initial)
FLETCHER FOR CONGRESS

Mailing Address
PO BOX 4703

City: LEXINGTON
State: KY
Zip Code: 40544

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: KY District: 06

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

Date of Disbursement: 06 03 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.52

C.
Full Name (Last, First, Middle Initial)
FRIENDS OF SHERROD BROWN

Mailing Address
607 14TH STREET NW SUITE 800

City: WASHINGTON
State: DC
Zip Code: 20005

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: OH District: 13

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

Date of Disbursement: 06 03 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.34

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
FUND FOR A RESPONSIBLE FUTURE

Mailing Address
PO BOX 529

City: WASHINGTON
State: DC
Zip Code: 20044

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 06 / 03 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.54

B.
Full Name (Last, First, Middle Initial)
GOVERNOR GEORGE W BUSH PRESIDENTIAL EXPLORATORY COMMITTEE INC

Mailing Address
504 LAVACA #1010

City: AUSTIN
State: TX
Zip Code: 78701

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / Senate / X President
State: District: 03

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

Date of Disbursement: 06 / 17 / 1999

Amount of Each Disbursement this Period: 2000.00

Transaction ID: SB23.84

C.
Full Name (Last, First, Middle Initial)
JEFFORDS FOR VERMONT

Mailing Address
P.O. BOX 246 C/O SUSAN RUSS

City: MONTPELIER
State: VT
Zip Code: 05601

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: VT District: 00

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

Date of Disbursement: 03 / 22 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.58

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial): JEFFORDS FOR VERMONT
Mailing Address: P.O. BOX 246 C/O SUSAN RUSS
City: MONTPELIER State: VT Zip Code: 05601
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: VT District: 00
Disbursement For: X Primary General / Other (specify)
Date of Disbursement: 05 20 1999
Amount of Each Disbursement this Period: 4000.00
Transaction ID: SB23.58

B.
Full Name (Last, First, Middle Initial): JEFFORDS FOR VERMONT
Mailing Address: P.O. BOX 246 C/O SUSAN RUSS
City: MONTPELIER State: VT Zip Code: 05601
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: VT District: 00
Disbursement For: Primary X General / Other (specify)
Date of Disbursement: 05 20 1999
Amount of Each Disbursement this Period: 1000.00
Transaction ID: SB23.62

C.
Full Name (Last, First, Middle Initial): JEFFORDS FOR VERMONT
Mailing Address: P.O. BOX 246 C/O SUSAN RUSS
City: MONTPELIER State: VT Zip Code: 05601
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: VT District: 00
Disbursement For: Primary X General / Other (specify)
Date of Disbursement: 06 16 1999
Amount of Each Disbursement this Period: 1000.00
Transaction ID: SB23.64

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A. Full Name (Last, First, Middle Initial)
JIM RAMSTAD VOLUNTEER COMMITTEE

Mailing Address
8100 PENN AVENUE SOUTH SUITE 104

City: BLOOMINGTON State: MN Zip Code: 55431

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: MN District: 03

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

Date of Disbursement: 03 / 03 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.28

B. Full Name (Last, First, Middle Initial)
JON KYL FOR U S SENATE

Mailing Address
POST OFFICE BOX 10248

City: PHOENIX State: AZ Zip Code: 85064

Purpose of Disbursement
Designated from W/N Committee

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: AZ District: 00

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

Date of Disbursement: 06 / 16 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.88

C. Full Name (Last, First, Middle Initial)
KAY BAILEY HUTCHISON FOR SENATE COMMITTEE

Mailing Address
PO BOX 9190 800 BRAZOS SUITE 1200

City: DALLAS State: TX Zip Code: 75209

Purpose of Disbursement
Designated from W/N Committee

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: TX District: 00

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

Date of Disbursement: 06 / 16 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.88

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
MONICA MONICA MD CONGRESS COMMITTEE

Mailing Address
POST OFFICE BOX 56136
City: METAIRIE State: LA Zip Code: 70005

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: LA District: 01

Disbursement For: Primary / General / Other (specify) ▼ Special-Primary

Date of Disbursement: 04 / 04 / 1999

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.38

B.
Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE CONTRIBUTIONS

Mailing Address
320 FIRST STREET
City: WASHINGTON State: DC Zip Code: 20003

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 01 / 21 / 1999

Amount of Each Disbursement this Period: 2500.00

Transaction ID: SB23.90

C.
Full Name (Last, First, Middle Initial)
NORWOOD FOR CONGRESS

Mailing Address
P O BOX 499
City: EVANS State: GA Zip Code: 30809

Purpose of Disbursement
uncashed check voided

Candidate Name

Category/Type

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

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

Date of Disbursement: 01 / 04 / 1999

Amount of Each Disbursement this Period: -2000.00

Transaction ID: SB23.92

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
NORWOOD FOR CONGRESS

Mailing Address
P O BOX 469
City: EVANS State: GA Zip Code: 30809

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 03 17 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.40

B.
Full Name (Last, First, Middle Initial)
NORWOOD FOR CONGRESS

Mailing Address
P O BOX 469
City: EVANS State: GA Zip Code: 30809

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 05 26 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.46

C.
Full Name (Last, First, Middle Initial)
Orrin Hatch for President

Mailing Address
P.O. Box 1480
City: Washington State: DC Zip Code: 20013

Purpose of Disbursement
Designated from W/N Committee

Candidate Name

Category/Type

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

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

Date of Disbursement: 06 16 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.93

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial): PEOPLE FOR ENGLISH
Mailing Address: PO BOX 1940
City: ERIE State: PA Zip Code: 16507
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: PA District: 21
Disbursement For: X Primary / General / Other (specify)
Date of Disbursement: 05 09 1999
Amount of Each Disbursement this Period: 1000.00
Transaction ID: SB23.24

B.
Full Name (Last, First, Middle Initial): PEOPLE FOR GANSKE
Mailing Address: 521 E LOCUST 2ND FLOOR
City: DES MOINES State: IA Zip Code: 50309
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: IA District: 04
Disbursement For: X Primary / General / Other (specify)
Date of Disbursement: 04 02 1999
Amount of Each Disbursement this Period: 1000.00
Transaction ID: SB23.42

C.
Full Name (Last, First, Middle Initial): PORTER FOR CONGRESS
Mailing Address: 1920 EAST CAPITOL AVENUE #205
City: BISMARCK State: ND Zip Code: 58501
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: ND District: 00
Disbursement For: X Primary / General / Other (specify)
Date of Disbursement: 05 13 1999
Amount of Each Disbursement this Period: 500.00
Transaction ID: SB23.98

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)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
RANGEL FOR CONGRESS 2000

Mailing Address
PO BOX 5577 MANHATTANVILLE STA
City State Zip Code
NEW YORK NY 10027

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: NY District: 15

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

Date of Disbursement
04 13 1999

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.30

B.
Full Name (Last, First, Middle Initial)
RE-ELECT NANCY JOHNSON TO CONG

Mailing Address
PO BOX 1986
City State Zip Code
NEW BRITAIN CT 06050

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: CT District: 06

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

Date of Disbursement
03 01 1999

Amount of Each Disbursement this Period
1500.00

Transaction ID: SB23.36

C.
Full Name (Last, First, Middle Initial)
REPUBLICAN MAJORITY FUND

Mailing Address
1155 21ST STREET NW #300
City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement

Candidate Name

Category/ Type

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

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

Date of Disbursement
05 05 1999

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.18

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
Republican Senate-House Dinner

Mailing Address
P.O. Box 1721
City: Washington State: DC Zip Code: 20013

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 06 / 15 / 1999

Amount of Each Disbursement this Period: 3000.00

Transaction ID: SB23.98

B.
Full Name (Last, First, Middle Initial)
THURMAN FOR CONGRESS

Mailing Address
450 PLEASANT GROVE ROAD
City: INVERNESS State: FL Zip Code: 34452

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: FL District: 05

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

Date of Disbursement: 06 / 03 / 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.50

C.
Full Name (Last, First, Middle Initial)
TRENT LOTT FOR MISSISSIPPI

Mailing Address
PO BOX 22824
City: JACKSON State: MS Zip Code: 39225

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: MS District: 00

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

Date of Disbursement: 05 / 05 / 1999

Amount of Each Disbursement this Period: 5000.00

Transaction ID: SB23.22

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A.
Full Name (Last, First, Middle Initial)
W/N 1999

Mailing Address
P.O. Box 75103
City: Washington
State: DC
Zip Code: 20013

Purpose of Disbursement

Candidate Name

Category/Type

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

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

Date of Disbursement: 06 16 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.100

B.
Full Name (Last, First, Middle Initial)
WEYGAND COMMITTEE

Mailing Address
PO BOX 7818
City: WARWICK
State: RI
Zip Code: 02887

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: RI District: 00

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

Date of Disbursement: 05 20 1999

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.44

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

TOTAL This Period (last page this line number only) ..... ▶ **39554.64**