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 Oral and Maxillofacial Surgeons Political Action Committee

ADDRESS (number and street) ▼ 9700 West Bryn Mawr Ave.

Check if different than previously reported. (ACC)

Rosemont | IL | 60018 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00005660

CITY ▲ | STATE ▲ | ZIPCODE ▲

3. IS THIS REPORT — NEW (N) **OR** X 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)
- X 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: General (30G) | Runoff (30R) | Special (30S)

Election on ____ in the State of ____

5. Covering Period 11 26 2002 through 12 31 2002

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

Type or Print Name of Treasurer: Dr. Douglas Fain

Signature of Treasurer: Electronically Filed by Dr. Douglas Fain — Date: 02 11 2003

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

Office Use Only			

FEC FORM 3X
(Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

American Association of Oral and Maxillofacial Surgeons Political Action Committee

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

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2002		415225.23
	(b) Cash on Hand at Begining of Reporting Period	268673.64	
	(c) Total Receipts (from Line 19)	81773.52	264822.07
	(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	350447.16	680047.30
7.	Total Disbursements (from Line 30)	26.60	329626.74
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	350420.56	350420.56
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	633.00	
10.	Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	1885.00	

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

Write or Type Committee Name

American Association of Oral and Maxillofacial Surgeons Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	32700.00	
(ii) Unitemized	30030.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	62730.00	216085.00
(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) ▶	62730.00	216085.00
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	18750.00	43250.00
17. Other Federal Receipts Dividends, Interest, etc.)	293.52	5487.07
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) ▶	81773.52	264822.07
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	81773.52	264822.07

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	26.60	22775.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	26.60	22775.13
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	280500.00
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	900.00
(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	900.00
29. Other Disbursements	0.00	25451.61
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	26.60	329626.74
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	26.60	329626.74
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	62730.00	216085.00
33. Total Contribution Refunds (from Line 28(d))	0.00	900.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	62730.00	215185.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	26.60	22775.13
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	26.60	22775.13

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 61
(check only one)
[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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. James Adams
Mailing Address
750 Almar Pkwy Suite 102
City State Zip Code
Bourbonnais IL 60914
FEC ID number of contributing federal political committee.
Name of Employer
Drs Slaby Adams & Assoc Ltd
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8303

B.
Full Name (Last, First, Middle Initial)
Dr. Eric Allucker
Mailing Address
990 Boysen Ave.
City State Zip Code
San Luis Obispo CA 93401
FEC ID number of contributing federal political committee.
Name of Employer
Self
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
500.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
500.00
Transaction ID: SA11A1.8316

C.
Full Name (Last, First, Middle Initial)
Dr. Brian Alpert
Mailing Address
ULSD
City State Zip Code
Louisville KY 40292
FEC ID number of contributing federal political committee.
Name of Employer
University of Louisville
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 18 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8319

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Alan Ansello
Mailing Address
550 Cabot Street
City | State | Zip Code
Beverly | MA | 01915-2511
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8322

B. Full Name (Last, First, Middle Initial)
Dr. Bernard Asdell
Mailing Address
707 N. Michigan St. suite 300
City | State | Zip Code
South Bend | IN | 46601-1070
FEC ID number of contributing federal political committee.
Name of Employer: Michiana OMS
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 12 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8323

C. Full Name (Last, First, Middle Initial)
Dr. G. Atwell
Mailing Address
901 Leghton Avenue Suite 401
City | State | Zip Code
Anniston | AL | 36207
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 325.00
Transaction ID: SA11A1.8324

SUBTOTAL of Receipts This Page (optional) ▶ **725.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Gordon Austin
Mailing Address
423 N. Lakeshore Dr.
City | State | Zip Code
Carrollton | GA | 30117
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8325

B. Full Name (Last, First, Middle Initial)
Dr. R. Bailey
Mailing Address
595 East Medical Center Blvd
City | State | Zip Code
Daytona Beach | FL | 32117
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeons
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 12 11 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8326

C. Full Name (Last, First, Middle Initial)
Dr. A. Bellin
Mailing Address
6053 Nicollet Ave
City | State | Zip Code
Minneapolis | MN | 55419-2556
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8327

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. George Barfield
Mailing Address
2106 N. Palm
City: Pasadena | State: TX | Zip Code: 77504
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 16 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8329

B. Full Name (Last, First, Middle Initial)
Dr. Russell Bass
Mailing Address
220 Denton Tap Road Suite 101
City: Coppell | State: TX | Zip Code: 75019
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 10 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8330

C. Full Name (Last, First, Middle Initial)
Dr. John Bassett
Mailing Address
32 Stiles Road Suite 210
City: Salem | State: NH | Zip Code: 03079
FEC ID number of contributing federal political committee.
Name of Employer: John B. Bassett DMD PC
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 200.00
Transaction ID: SA11A1.8331

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

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Colin Bell
Mailing Address
4015 Worth Street
City: Dallas | State: TX | Zip Code: 75246-1606
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 17 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8333

B. Full Name (Last, First, Middle Initial)
Dr. John Blakemore
Mailing Address
26777 Lorain Road
City: North Olmstead | State: OH | Zip Code: 44070
FEC ID number of contributing federal political committee.
Name of Employer: North Coast Jaw Center
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 16 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8335

C. Full Name (Last, First, Middle Initial)
Dr. James Block
Mailing Address
11601 Minnetonka
City: Minnetonka | State: MN | Zip Code: 55343-9700
FEC ID number of contributing federal political committee.
Name of Employer: Affiliated OMS
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 17 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8339

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Christopher Bonacci
Mailing Address
9507 Blythe Dale Court
City | State | Zip Code
Vienna | VA | 22182
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8346

B. Full Name (Last, First, Middle Initial)
Dr. Charles Bowden
Mailing Address
933 Chinoe Place
City | State | Zip Code
Lexington | KY | 40502
FEC ID number of contributing federal political committee.
Name of Employer: Beaumont Office Plaza
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 12 27 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8349

C. Full Name (Last, First, Middle Initial)
Dr. Jack Buhrow
Mailing Address
4202 North 32nd Street | Suite A
City | State | Zip Code
Phoenix | AZ | 85018
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 20 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8361

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Robert Burns
Mailing Address
481 North Harbor City Blvd
City | State | Zip Code
Melbourne | FL | 32935
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 23 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8364

B.
Full Name (Last, First, Middle Initial)
Dr. David Butler
Mailing Address
505 Cragmont
City | State | Zip Code
Madison | IN | 47250-3003
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8366

C.
Full Name (Last, First, Middle Initial)
Dr. Stephen Cameron
Mailing Address
1212 York Road Suite A201
City | State | Zip Code
Lutherville | MD | 21093-6206
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeons
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8370

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Joseph Carlisle
Mailing Address
372 S. Herlong Ave.
City | State | Zip Code
Rock Hill | SC | 29732
FEC ID number of contributing federal political committee.
Name of Employer: The Center for OMS
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 11 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8373

B.
Full Name (Last, First, Middle Initial)
Dr. Nelson Castellano
Mailing Address
3302 Azeele Street
City | State | Zip Code
Tampa | FL | 33609-3020
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 12 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8375

C.
Full Name (Last, First, Middle Initial)
Dr. Terry Dieter
Mailing Address
1602 N. Randall Ave.
City | State | Zip Code
Janesville | WI | 53545
FEC ID number of contributing federal political committee.
Name of Employer: Southern Wisconsin OMS
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 650.00

Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8381

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Patrick Coleman
Mailing Address
19600 Highway 73 Suite C1D1
City State Zip Code
Cornelius NC 28031
FEC ID number of contributing federal political committee.
Name of Employer
Dr. Coleman & Muldoon
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
250.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
250.00
Transaction ID: SA11A1.8474

B.
Full Name (Last, First, Middle Initial)
Dr. Kevin Corry
Mailing Address
2333 Morris Avenue Suite D7
City State Zip Code
Union NJ 07083
FEC ID number of contributing federal political committee.
Name of Employer
Union Oral & Maxillofacial Surgeons
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 27 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8478

C.
Full Name (Last, First, Middle Initial)
Dr. Stephen Cosentino
Mailing Address
1215 Doctors Drive
City State Zip Code
Tyler TX 75701
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 18 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8479

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: PAGE 14 / 61
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
DR. David Crouthamel
Mailing Address
800 West Chandler Blvd | Suite 3
City | State | Zip Code
Chandler | AZ | 85225
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 650.00

Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8483

B.
Full Name (Last, First, Middle Initial)
Dr. Marvin Dash
Mailing Address
355 Fifth Avenue | Suite 1300 Park Bldg
City | State | Zip Code
Pittsburgh | PA | 15222-2407
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8487

C.
Full Name (Last, First, Middle Initial)
Dr. Mitchell Day
Mailing Address
2025 Forest Avenue | Suite 6
City | State | Zip Code
San Jose | CA | 55126
FEC ID number of contributing federal political committee.
Name of Employer: Oral & Maxillofacial Surgery
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 825.00

Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 325.00
Transaction ID: SA11A1.8490

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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: PAGE 15 / 61
(check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Paul DeLong
Mailing Address
968 W. Third St.
City | State | Zip Code
Dubuque | IA | 52001-6607
FEC ID number of contributing federal political committee.
Name of Employer: West Third OMS Associates
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8493

B.
Full Name (Last, First, Middle Initial)
Dr. Michael Doucet
Mailing Address
500 San Pablo Avenue Suite 100
City | State | Zip Code
Albany | CA | 94706-1127
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 12 31 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8502

C.
Full Name (Last, First, Middle Initial)
Dr. Blaise Eckert
Mailing Address
68 Leonard Street
City | State | Zip Code
Belmont | MA | 02478
FEC ID number of contributing federal political committee.
Name of Employer: Belmont OMS
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8507

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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: PAGE 16 / 61
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Gregory Edmonds
Mailing Address
10827 South 51st Street Suite 204
City State Zip Code
Phoenix AZ 85044
FEC ID number of contributing federal political committee.
Name of Employer
Ahwatukee OMS
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
650.00
Date of Receipt
12 09 2002
Amount of Each Receipt this Period
500.00
Transaction ID: SA11A1.8508

B. Full Name (Last, First, Middle Initial)
Dr. Robert Emery
Mailing Address
2021 K St. NW Suite 200
City State Zip Code
Washington DC 20006-1003
FEC ID number of contributing federal political committee.
Name of Employer
The Washington Institute for Mouth, Fa
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
250.00
Date of Receipt
12 05 2002
Amount of Each Receipt this Period
250.00
Transaction ID: SA11A1.8512

C. Full Name (Last, First, Middle Initial)
Dr. David Evanius
Mailing Address
2440 West Peterson Avenue
City State Zip Code
Chicago IL 60659-4113
FEC ID number of contributing federal political committee.
Name of Employer
Oral Surgery Associates
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
625.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
325.00
Transaction ID: SA11A1.8517

SUBTOTAL of Receipts This Page (optional) ▶ **1075.00**

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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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Richard Fagin
Mailing Address
235 North San Mateo Drive
City: San Mateo | State: CA | Zip Code: 94401

Date of Receipt: 12 / 18 / 2002
Amount of Each Receipt this Period: 150.00

FEC ID number of contributing federal political committee.

Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon

Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Transaction ID: SA11A1.8520

B. Full Name (Last, First, Middle Initial)
Dr. Douglas Fain
Mailing Address
3700 W. 83rd | Suite 203
City: Prairie Village | State: KS | Zip Code: 66208-5120

Date of Receipt: 12 / 26 / 2002
Amount of Each Receipt this Period: 500.00

FEC ID number of contributing federal political committee.

Name of Employer: Oral & Facial Surgery Assoc.
Occupation: Oral Surgeon

Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1075.00

Transaction ID: SA11A1.8521

C. Full Name (Last, First, Middle Initial)
Dr. Gary Feldman
Mailing Address
1221 Madison Street | Suite 1116
City: SEattle | State: WA | Zip Code: 98104-1361

Date of Receipt: 12 / 11 / 2002
Amount of Each Receipt this Period: 150.00

FEC ID number of contributing federal political committee.

Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon

Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Transaction ID: SA11A1.8522

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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: PAGE 18 / 61
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Bruce Fisher
Mailing Address
1001 South Bradford Street Suite 2
City | State | Zip Code
Dover | DE | 19904
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 10 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8530

B.
Full Name (Last, First, Middle Initial)
Dr. Howard Fisher
Mailing Address
1755 Lewis Turner Blvd
City | State | Zip Code
Fort Walton Beach | FL | 32547-1221
FEC ID number of contributing federal political committee.
Name of Employer: Oral & Maxillofacial Surgery
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 27 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8532

C.
Full Name (Last, First, Middle Initial)
Dr. William Friedel
Mailing Address
286 Patchogue-Yaphank Road
City | State | Zip Code
Patchogue | NY | 11772-4806
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8539

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Richard Fugler
Mailing Address
45 Flag Lake Plaza
City | State | Zip Code
Lake Jackson | TX | 77566
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 27 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8540

B. Full Name (Last, First, Middle Initial)
Dr. Carroll Gallagher
Mailing Address
2320 Cosgrove Ave.
City | State | Zip Code
Charleston | SC | 29405-7644
FEC ID number of contributing federal political committee.
Name of Employer: OMS Associates
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8543

C. Full Name (Last, First, Middle Initial)
Dr. Stephen Gandy
Mailing Address
971 Lakeside Drive | Suite 225
City | State | Zip Code
Jackson | MS | 39216
FEC ID number of contributing federal political committee.
Name of Employer: OMS Associates
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8544

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Lanny Garver
Mailing Address
7401 North University Drive | Suite 102
City | State | Zip Code
Tamarac | FL | 33321-2991
FEC ID number of contributing federal political committee.
Name of Employer: Garver & Steward DMD
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8775

B. Full Name (Last, First, Middle Initial)
Dr. Theodore George
Mailing Address
939 Emerald Avenue | Suite 501
City | State | Zip Code
Knoxville | TN | 37917
FEC ID number of contributing federal political committee.
Name of Employer: OMS associates
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8550

C. Full Name (Last, First, Middle Initial)
Dr. James Gherardini
Mailing Address
1750 Pickwick Place
City | State | Zip Code
Orange Park | FL | 32073-7266
FEC ID number of contributing federal political committee.
Name of Employer: U.S. Military
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 16 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8551

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. James Glore
Mailing Address
737 Broadway
City | State | Zip Code
Fargo | ND | 58123
FEC ID number of contributing federal political committee.
Name of Employer
Meritcare medical Group OMS Dpt
Occupation
Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date
300.00

Date of Receipt
12 18 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8552

B.
Full Name (Last, First, Middle Initial)
Dr. Gene Glover
Mailing Address
1706 Medical Park Drive
City | State | Zip Code
Wilson | NC | 27893
FEC ID number of contributing federal political committee.
Name of Employer
Wilson Centre for OMS
Occupation
Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date
250.00

Date of Receipt
12 26 2002
Amount of Each Receipt this Period
250.00
Transaction ID: SA11A1.8555

C.
Full Name (Last, First, Middle Initial)
Dr. Steven Green
Mailing Address
8919 Parallel Pkwy Suite 480
City | State | Zip Code
Kansas City | KS | 66112
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date
250.00

Date of Receipt
12 05 2002
Amount of Each Receipt this Period
125.00
Transaction ID: SA11A1.8388

SUBTOTAL of Receipts This Page (optional) ▶ **525.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. David Greene
Mailing Address
39 Simon Street
City | State | Zip Code
Nashua | NH | 03060
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 275.00

Date of Receipt: 12 19 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8389

B.
Full Name (Last, First, Middle Initial)
Dr. Katherine A. Halborn
Mailing Address
223 Walnut Street | Suite 2
City | State | Zip Code
Framingham | MA | 01701-8205
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8393

C.
Full Name (Last, First, Middle Initial)
Dr. Thomas Hebda
Mailing Address
7730 N. Union Blvd. | Suite 103
City | State | Zip Code
Colorado Springs | CO | 80920
FEC ID number of contributing federal political committee.
Name of Employer: Oral Surgery Spec. of Colorado springs
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1650.00

Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8408

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Gregory Heise

Mailing Address
2525 K St. | Ste 101

City | State | Zip Code
Sacramento | CA | 95816

FEC ID number of contributing federal political committee.

Name of Employer
Self Employed

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 30 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8777

B. Full Name (Last, First, Middle Initial)
Dr. Lee Heidt

Mailing Address
301 Alamo Drive | Suite E

City | State | Zip Code
Vacaville | CA | 95688

FEC ID number of contributing federal political committee.

Name of Employer
Self-Employed

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 09 2002

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.8410

C. Full Name (Last, First, Middle Initial)
Dr. Barry Hendler

Mailing Address
7901 Bustleton Avenue | Suite 304

City | State | Zip Code
Philadelphia | PA | 19152-3302

FEC ID number of contributing federal political committee.

Name of Employer
University of PA Med Center

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 30 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8412

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. William Hendrix
Mailing Address
308 Walnut Street Suite 26
City State Zip Code
San Diego CA 92103-4936
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 19 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8413

B. Full Name (Last, First, Middle Initial)
Dr. Roy A. Himelfarb
Mailing Address
182 South 2nd Street
City State Zip Code
Chambersburg PA 17201
FEC ID number of contributing federal political committee.
Name of Employer: Roy A. Himelfarb DDS Inc.
Occupation: Oral Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 13 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8419

C. Full Name (Last, First, Middle Initial)
Dr. William Hooe
Mailing Address
747 North 185th Street Suite 101
City State Zip Code
Seattle WA 98133
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8781

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 25 / 61
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Marshall Humes

Mailing Address
201 North College Drive | Suite 202

City | State | Zip Code
Santa Maria | CA | 93454

FEC ID number of contributing federal political committee.

Name of Employer
Coastal Maxillofacial Group

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
12 30 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8436

B. Full Name (Last, First, Middle Initial)
Dr. Murray Jacobs

Mailing Address
1213 Coffee Rd. | Suite D

City | State | Zip Code
Modesto | CA | 95355

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
12 31 2002

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.8439

C. Full Name (Last, First, Middle Initial)
Dr. Jeffrey Jones

Mailing Address
1120 Oak Ridge Drive

City | State | Zip Code
Eau Claire | WI | 54701

FEC ID number of contributing federal political committee.

Name of Employer
OMS Associates of Eau Claire

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 26 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8442

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Richard W. Joseph
Mailing Address
820 Prudential Drive Suite 312
City State Zip Code
Jacksonville FL 32207-8205
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 325.00
Transaction ID: SA11A1.8443

B. Full Name (Last, First, Middle Initial)
Dr. Michael Kapp
Mailing Address
9240 North Meridian Street Suite 300
City State Zip Code
Indianapolis IN 46260
FEC ID number of contributing federal political committee.
Name of Employer: Indiana OMS Associates
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8446

C. Full Name (Last, First, Middle Initial)
Dr. Dan W. Kasper
Mailing Address
929 W. Carl Sandburg Drive
City State Zip Code
Galesburg IL 61401-1342
FEC ID number of contributing federal political committee.
Name of Employer: Oral & Maxillofacial Surgery
Occupation: Oral Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 05 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8449

SUBTOTAL of Receipts This Page (optional) ▶ **975.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Peter Kaufman
Mailing Address
3900 Clark Rd. | building 1
City | State | Zip Code
Sarasota | FL | 34233-2301
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8786

B.
Full Name (Last, First, Middle Initial)
Dr. W. Kelly
Mailing Address
59 Quinsigamond Avenue
City | State | Zip Code
Worcester | MA | 01610-1895
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8452

C.
Full Name (Last, First, Middle Initial)
Dr. Roger Kingston
Mailing Address
12395 El Camino Real | Suite 304
City | State | Zip Code
San Diego | CA | 52130
FEC ID number of contributing federal political committee.
Name of Employer: Torrey Pines OMS
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 17 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8454

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Michael Kleiman
Mailing Address
1857 Oak Tree Rd.
City | State | Zip Code
Edison | NJ | 08820
FEC ID number of contributing federal political committee.
Name of Employer: Edison Clark Oral Surgery Associates
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8455

B. Full Name (Last, First, Middle Initial)
Dr. Gary Koehl
Mailing Address
1015 Shook Avenue
City | State | Zip Code
San Antonio | TX | 78212-2508
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8458

C. Full Name (Last, First, Middle Initial)
Dr. Mary H. Kreitzer
Mailing Address
123 Dwight Road
City | State | Zip Code
Longmeadow | MA | 01106
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8459

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Woodrow Lahr
Mailing Address
1777 Lake O'Pines Ste NE
City | State | Zip Code
Hartville | OH | 44632
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8464

B. Full Name (Last, First, Middle Initial)
Dr. Richard Lee
Mailing Address
1816 Chapel Drive Suite H
City | State | Zip Code
Findlay | OH | 45840-1343
FEC ID number of contributing federal political committee.
Name of Employer: OMS Associates
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8469

C. Full Name (Last, First, Middle Initial)
Dr. Larry Lenth
Mailing Address
3640 Canterbury Court
City | State | Zip Code
Waterloo | IA | 50702
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8470

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Dale Lentz

Mailing Address
7350 S McClinbock | suite 101

City | State | Zip Code
Tempe | AZ | 85283-3268

FEC ID number of contributing federal political committee.

Name of Employer
Dale D Lentz DDS PC

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 31 2002

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.8471

B. Full Name (Last, First, Middle Initial)
Dr. Robert Levy

Mailing Address
301 4th Street

City | State | Zip Code
Alexandria | LA | 71301-8423

FEC ID number of contributing federal political committee.

Name of Employer
Self-Employed

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 05 2002

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.8558

C. Full Name (Last, First, Middle Initial)
Dr. Stuart E. Liebich

Mailing Address
34 Dale Road | Suite 105

City | State | Zip Code
Avon | CT | 06001-3859

FEC ID number of contributing federal political committee.

Name of Employer
Avon OMS

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 19 2002

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.8561

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Norman Lippman
Mailing Address
712 South Governors Avenue
City: Dover | State: DE | Zip Code: 19904-7302
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 12 23 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8563

B. Full Name (Last, First, Middle Initial)
Dr. Lane Lopez
Mailing Address
2859 Loma Vista Rd.
City: Ventura | State: CA | Zip Code: 93003-1589
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8564

C. Full Name (Last, First, Middle Initial)
Dr. David Malin
Mailing Address
343 Franklin Road Suite 106
City: Brentwood | State: TN | Zip Code: 37027-5250
FEC ID number of contributing federal political committee.
Name of Employer: Self Employed
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8570

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Richard Mandel

Mailing Address
801 N Tustin Ave. | suite 705

City | State | Zip Code
Santa Ana | CA | 92705-3607

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 18 2002

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.8571

B. Full Name (Last, First, Middle Initial)
Dr. Taylor L. Markle

Mailing Address
1010 Carondelet Drive | Suite 316

City | State | Zip Code
Kansas City | MO | 64114

FEC ID number of contributing federal political committee.

Name of Employer
Self-Employed

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 12 2002

Amount of Each Receipt this Period
325.00

Transaction ID: SA11A1.8572

C. Full Name (Last, First, Middle Initial)
Dr. Edward Marshall

Mailing Address
3040 West Market Street

City | State | Zip Code
Akron | OH | 44333-3842

FEC ID number of contributing federal political committee.

Name of Employer
Self-Employed

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 18 2002

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.8573

SUBTOTAL of Receipts This Page (optional) ▶ **825.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Michael W. Marshall
Mailing Address
14343 Bellflower Blvd
City | State | Zip Code
Bellflower | CA | 90706-3135
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8574

B. Full Name (Last, First, Middle Initial)
Dr. John Matheson
Mailing Address
5 Rockcliff Place
City | State | Zip Code
Asheville | NC | 28801-4608
FEC ID number of contributing federal political committee.
Name of Employer: Rockcliff Place Oral & Maxillo Surg
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8575

C. Full Name (Last, First, Middle Initial)
Dr. Ronald Mead
Mailing Address
990 Boysen Ave
City | State | Zip Code
San Luis Obispo | CA | 93405-1313
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8576

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Michael Miller
Mailing Address
316 Chappaqua Road
City | State | Zip Code
Briarcliff Manor | NY | 10510-1354
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8793

B. Full Name (Last, First, Middle Initial)
Dr. John Monterubio
Mailing Address
1034 South Brentwood Suite 101D
City | State | Zip Code
St. Louis | MO | 63117-1210
FEC ID number of contributing federal political committee.
Name of Employer: Monterubio & Herbosa OMS
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8585

C. Full Name (Last, First, Middle Initial)
Dr. Dan Moore
Mailing Address
4501 Texas Blvd
City | State | Zip Code
Texarkana | TX | 75503
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8586

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Jose Morales
Mailing Address
Geranio St - #31
City | State | Zip Code
San Juan | PR | 00927
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 09 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8587

B.
Full Name (Last, First, Middle Initial)
Dr. Richard Mowry
Mailing Address
340 4th Ave. Suite 17
City | State | Zip Code
Chula Vista | CA | 91910
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8588

C.
Full Name (Last, First, Middle Initial)
Dr. George Muller
Mailing Address
3415 Fifth St.
City | State | Zip Code
Rapid City | SD | 57701-7330
FEC ID number of contributing federal political committee.
Name of Employer: Black Hill OMS
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8794

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Bryan Neuwirth
Mailing Address
905 10th Avenue Drive NW
City | State | Zip Code
Hickory | NC | 28601-9200
FEC ID number of contributing federal political committee.
Name of Employer
Brown & Neuwirth Oral & Cosmetic Surg
Occupation
Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date
750.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
250.00
Transaction ID: SA11A1.8592

B.
Full Name (Last, First, Middle Initial)
Dr. Charles Nissman
Mailing Address
137 W Street Road
City | State | Zip Code
Feasterville | PA | 19053-4168
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date
300.00
Date of Receipt
12 16 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8593

C.
Full Name (Last, First, Middle Initial)
Dr. Richard Oakley
Mailing Address
5811 Nall Avenue
City | State | Zip Code
Mission | KS | 66202
FEC ID number of contributing federal political committee.
Name of Employer
Corporate Lakes Surgery Center
Occupation
Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date
400.00
Date of Receipt
12 17 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8599

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Terry Olejko
Mailing Address
615 Copeland Mill Rd. Suite 2A
City State Zip Code
Westerville OH 43081-8804
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 31 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8600

B. Full Name (Last, First, Middle Initial)
Dr. Mark Ocsess
Mailing Address
3400 W. Lomita Blvd. Suite 607
City State Zip Code
Torrance CA 90505
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 28 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8606

C. Full Name (Last, First, Middle Initial)
Dr. Kevin Patterson
Mailing Address
180 Adams Suite 100
City State Zip Code
Denver CO 80206
FEC ID number of contributing federal political committee.
Name of Employer: Cosby James & Patterson
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8609

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Richard Paul
Mailing Address
150 Country Club Drive | Suite 200
City | State | Zip Code
Stockbridge | GA | 30281
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 12 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8611

B.
Full Name (Last, First, Middle Initial)
Dr. Lynn Philippe
Mailing Address
7777 Hennessy Blvd. | Suite 610
City | State | Zip Code
Baton Rouge | LA | 70808-4392
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 31 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8615

C.
Full Name (Last, First, Middle Initial)
Dr. Charles Philips
Mailing Address
12395 El Camino Real | Suite 304
City | State | Zip Code
San Deigo | CA | 52130
FEC ID number of contributing federal political committee.
Name of Employer: Torrey Pines OMS
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 17 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8616

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Scott Podlesh

Mailing Address
885 Scott Blvd | Suite 1

City | State | Zip Code
Santa Clara | CA | 95050

FEC ID number of contributing federal political committee.

Name of Employer
Scott W. Podlesh DDS

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
12 09 2002

Amount of Each Receipt this Period
325.00

Transaction ID: SA11A1.8622

B. Full Name (Last, First, Middle Initial)
Dr. Daniel Quon

Mailing Address
5800 Ridgewood | Suite 102

City | State | Zip Code
Jackson | MS | 39211-2667

FEC ID number of contributing federal political committee.

Name of Employer
Self-Employed

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
12 05 2002

Amount of Each Receipt this Period
325.00

Transaction ID: SA11A1.8627

C. Full Name (Last, First, Middle Initial)
Dr. Clive Rayner

Mailing Address
2901 Park | Suite 101

City | State | Zip Code
Orange Park | FL | 32073

FEC ID number of contributing federal political committee.

Name of Employer
Oral-Facial Surgery of Orange Park

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 31 2002

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.8630

SUBTOTAL of Receipts This Page (optional) ▶ **1150.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Donald Rebhun
Mailing Address
2301 Evesham Rd. Suite 211
City State Zip Code
Voorhees NJ 08043-4503
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8795

B.
Full Name (Last, First, Middle Initial)
Dr. Ronald Radus
Mailing Address
3501 Soncy Road Unit 101
City State Zip Code
Amarillo TX 79119-6405
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8831

C.
Full Name (Last, First, Middle Initial)
Dr. Scott Rehm
Mailing Address
2708 Henry Street
City State Zip Code
Greensboro NC 27405
FEC ID number of contributing federal political committee.
Name of Employer: Greensboro Ctr for Oral & Maxillofacia
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 16 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8832

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. John Robinson
Mailing Address
4 Medical Park Dr.
City | State | Zip Code
Asheville | NC | 28803
FEC ID number of contributing federal political committee.
Name of Employer: John W. Robinson III DMD PLLC
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 12 27 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8641

B. Full Name (Last, First, Middle Initial)
Dr. Charles Rosenburg
Mailing Address
755 Mount Vernon Hwy | Suite 430
City | State | Zip Code
Atlanta | GA | 30328-4277
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 12 31 2002
Amount of Each Receipt this Period: 325.00
Transaction ID: SA11A1.8642

C. Full Name (Last, First, Middle Initial)
Dr. Joel Rosenlicht
Mailing Address
483 West Middle Turnpike | Suite 102
City | State | Zip Code
Manchester | CT | 06040
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 20 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8644

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Matthew Rosakowski
Mailing Address
5000 126th Street North
City | State | Zip Code
White Bear Lake | MN | 55110
FEC ID number of contributing federal political committee.
Name of Employer
Minnesota Maxillofacial & Oral Cons PA
Occupation
Oral & Maxillofacial Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
300.00
Date of Receipt
12 16 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8646

B.
Full Name (Last, First, Middle Initial)
Dr. Neal Roth
Mailing Address
41-A Admiral Callaghan Ln.
City | State | Zip Code
Vallejo | CA | 94591-4003
FEC ID number of contributing federal political committee.
Name of Employer
Self
Occupation
Oral Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
300.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8647

C.
Full Name (Last, First, Middle Initial)
Dr. Edward Royal
Mailing Address
42051 Mound Road
City | State | Zip Code
Sterling Heights | MI | 48314
FEC ID number of contributing federal political committee.
Name of Employer
Oakland Oral Surgery
Occupation
Oral Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
300.00
Date of Receipt
12 18 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8648

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Lawrence Ryan
Mailing Address
11 South Main Street
City | State | Zip Code
Marlborough | CT | 06447
FEC ID number of contributing federal political committee.
Name of Employer: Self Employed
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8796

B.
Full Name (Last, First, Middle Initial)
Dr. Terry Sawyer
Mailing Address
5851 Frist Blvd Suite 301
City | State | Zip Code
Hermitage | TN | 37076
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 325.00

Date of Receipt: 12 27 2002
Amount of Each Receipt this Period: 325.00
Transaction ID: SA11A1.8857

C.
Full Name (Last, First, Middle Initial)
Dr. Louis Scannura
Mailing Address
3007 Spring Mill Drive
City | State | Zip Code
Springfield | IL | 62704
FEC ID number of contributing federal political committee.
Name of Employer: Springfield Associates In OMS
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 26 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8858

SUBTOTAL of Receipts This Page (optional) ▶ **825.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Paul Schaner
Mailing Address
2501 Windyhill Road Suite 150
City State Zip Code
Marietta GA 30067
FEC ID number of contributing federal political committee.
Name of Employer
Atlanta Oral & Facial Surgery
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 30 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8660

B. Full Name (Last, First, Middle Initial)
Dr. Robert Scheiber
Mailing Address
2000 East Market Street
City State Zip Code
Warren OH 44483-6156
FEC ID number of contributing federal political committee.
Name of Employer
Self Employed
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
400.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8661

C. Full Name (Last, First, Middle Initial)
Dr. J. Scully
Mailing Address
5 Rockcliff Place
City State Zip Code
Asheville NC 28801-4806
FEC ID number of contributing federal political committee.
Name of Employer
Drs. Scully & Matheson PA
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
500.00
Date of Receipt
12 18 2002
Amount of Each Receipt this Period
250.00
Transaction ID: SA11A1.8667

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. P. Seider

Mailing Address
3157 North University Drive | Suite 104

City | State | Zip Code
Pembroke Pines | FL | 33024-2234

FEC ID number of contributing federal political committee.

Name of Employer
Broward Oral Surgery Associates

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 30 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8668

B. Full Name (Last, First, Middle Initial)
Dr. Jay Selznick

Mailing Address
2551 North Green Valley Pkwy | Suite 305 Bldg C

City | State | Zip Code
Henderson | NV | 89014

FEC ID number of contributing federal political committee.

Name of Employer
Double R OMS

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 16 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8669

C. Full Name (Last, First, Middle Initial)
Dr. Howard Sepkowitz

Mailing Address
106 Main St. | Box 287

City | State | Zip Code
Stoneham | MA | 02180-3317

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 18 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8670

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Robert Seymour
Mailing Address
2711 Randolph Road Suite 510
City State Zip Code
Charlotte NC 28207-2027
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8671

B.
Full Name (Last, First, Middle Initial)
Dr. Frederick Smith
Mailing Address
7 Timberpark Court
City State Zip Code
Lutherville MD 21093
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral & Maxillofacial Surgeons
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 30 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8801

C.
Full Name (Last, First, Middle Initial)
Dr. J. Solday
Mailing Address
507 North Frederick Avenue
City State Zip Code
Gaithersburg MD 20877-2506
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral & Maxillofacial Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
550.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8676

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Barry Stein
Mailing Address
211 West Beaver Avenue
City | State | Zip Code
State College | PA | 16801-4819
FEC ID number of contributing federal political committee.
Name of Employer
Tri-County Oral Facial Surgeons
Occupation
Oral Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
425.00
Date of Receipt
12 26 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8683

B. Full Name (Last, First, Middle Initial)
Dr. Mark Steinberg
Mailing Address
2160 South First Avenue
City | State | Zip Code
Maywood | IL | 60153
FEC ID number of contributing federal political committee.
Name of Employer
Loyola Univ Medical Center
Occupation
Oral & Maxillofacial Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
300.00
Date of Receipt
12 18 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8684

C. Full Name (Last, First, Middle Initial)
Dr. Jeffrey Stevens
Mailing Address
1051 North 35th Avenue
City | State | Zip Code
Hollywood | FL | 33021-5402
FEC ID number of contributing federal political committee.
Name of Employer
Broward Oral Surgery Associates
Occupation
Oral & Maxillofacial Surgeon
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
300.00
Date of Receipt
12 28 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8685

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Stanley Stewart
Mailing Address
7401 North University Drive | Suite 102
City | State | Zip Code
Tamarac | FL | 33321-2991
FEC ID number of contributing federal political committee.
Name of Employer: Garver & Stewart DMD
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8803

B. Full Name (Last, First, Middle Initial)
Dr. Albert Stofko
Mailing Address
401 Adams Ave. | Suite 205
City | State | Zip Code
Scranton | PA | 18510-2025
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8887

C. Full Name (Last, First, Middle Initial)
Dr. Kenneth Stoler
Mailing Address
132 Terryville Road
City | State | Zip Code
Pt Jefferson Stati | NY | 11776-1596
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 16 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8888

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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 Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Ira Sturman
Mailing Address
142-04 Bayside Avenue
City | State | Zip Code
Flushing | NY | 11354-2342
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8692

B. Full Name (Last, First, Middle Initial)
Dr. David Thompson
Mailing Address
3300 S. Tamiami Trail Suite 7
City | State | Zip Code
Sarasota | FL | 34239
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 18 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8700

C. Full Name (Last, First, Middle Initial)
Dr. Don Tillery
Mailing Address
1355 North Orange Ave. Suite 3
City | State | Zip Code
Winter Park | FL | 32789-3735
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 10 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8703

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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FOR LINE NUMBER: PAGE 50 / 61
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Boyd Tomesetti

Mailing Address
7889 South Lincoln Court | Suite 201

City | State | Zip Code
Littleton | CO | 80122

FEC ID number of contributing federal political committee.

Name of Employer
Rocky Mtn. Oral & Maxillo Surgery

Occupation
Oral & Maxillofacial Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
12 18 2002

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.8704

B. Full Name (Last, First, Middle Initial)
Dr. Vic Trammell

Mailing Address
2950 S. Elm Pl | suite 340

City | State | Zip Code
Broken Arrow | OK | 74012-7908

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 23 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8705

C. Full Name (Last, First, Middle Initial)
Dr. W. Tucker

Mailing Address
724 Druid Hills Rd.

City | State | Zip Code
Temple Terrace | FL | 33617-3810

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
12 20 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8706

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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: PAGE 51 / 61
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Gerald Unhold
Mailing Address
488 East Valley Pkwy Suite 105
City State Zip Code
Escondido CA 92025
FEC ID number of contributing federal political committee.
Name of Employer
North County Oral & Facial Surgeons
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
400.00
Date of Receipt
12 18 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8707

B.
Full Name (Last, First, Middle Initial)
Dr. James Vaiana
Mailing Address
241 Grant Avenue
City State Zip Code
LaSalle IL 61301
FEC ID number of contributing federal political committee.
Name of Employer
Illinois Valley OMS
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 30 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8808

C.
Full Name (Last, First, Middle Initial)
Dr. Terrence M. Wall
Mailing Address
7400 College Drive
City State Zip Code
Palos Heights IL 60463-1149
FEC ID number of contributing federal political committee.
Name of Employer
Self-Employed
Occupation
Oral Surgeon
Receipt For:
Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼
300.00
Date of Receipt
12 16 2002
Amount of Each Receipt this Period
150.00
Transaction ID: SA11A1.8713

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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: PAGE 52 / 61
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Richard Weisbecker

Mailing Address
710 19th Ave N | Suite 300

City | State | Zip Code
South St. Paul | MN | 55075

FEC ID number of contributing federal political committee.

Name of Employer
Self-Employed

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
12 28 2002

Amount of Each Receipt this Period
150.00

Transaction ID: SA11A1.8721

B. Full Name (Last, First, Middle Initial)
Dr. Philip Wheat

Mailing Address
3007 Spring Mill Drive

City | State | Zip Code
Springfield | IL | 62704

FEC ID number of contributing federal political committee.

Name of Employer
Springfield Associates in OMS

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 18 2002

Amount of Each Receipt this Period
400.00

Transaction ID: SA11A1.8728

C. Full Name (Last, First, Middle Initial)
Dr. Bruce Whitcher

Mailing Address
990 Boysen Ave.

City | State | Zip Code
San Luis Obispo | CA | 93401-1313

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Oral Surgeon

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
12 26 2002

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.8730

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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: PAGE 53 / 61
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dr. Roger Wilson
Mailing Address
3415 Fifth Street
City | State | Zip Code
Rapid City | SD | 57701
FEC ID number of contributing federal political committee.
Name of Employer: Black Hills OMS
Occupation: Oral & Maxillofacial Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.8733

B. Full Name (Last, First, Middle Initial)
Dr. Mark Zajkowski
Mailing Address
20 Long Creek Dr.
City | State | Zip Code
South Portland | ME | 04106
FEC ID number of contributing federal political committee.
Name of Employer: Self-Employed
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1075.00
Date of Receipt: 12 12 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.8735

C. Full Name (Last, First, Middle Initial)
Dr. Richard Ziegler
Mailing Address
5162 Cambrian Road
City | State | Zip Code
Toledo | OH | 43623-2863
FEC ID number of contributing federal political committee.
Name of Employer: Western Lake Erie OMS Ltd.
Occupation: Oral Surgeon
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 30 2002
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.8740

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

TOTAL This Period (last page this line number only) ▶ **32700.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 61
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Chet Edwards for Congress
Mailing Address
P.O. Box 23273
City | State | Zip Code
Waco | TX | 76702
FEC ID number of contributing federal political committee. C00240465
Name of Employer | Occupation
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 12 31 2002
Amount of Each Receipt this Period 1000.00
Refund of Federal Campaign Contribution
Transaction ID: SA16.8750

B. Full Name (Last, First, Middle Initial)
FRIENDS OF DAVE WELDON
Mailing Address
PO BOX 968
City | State | Zip Code
MELBOURNE | FL | 32902
FEC ID number of contributing federal political committee. C00294280
Name of Employer | Occupation
Receipt For: 2002
X Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 12 31 2002
Amount of Each Receipt this Period 1000.00
Refund of federal political contribution
Transaction ID: SA16.8752

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JERRY KLECZKA
Mailing Address
3150A S 12TH ST
City | State | Zip Code
MILWAUKEE | WI | 53215
FEC ID number of contributing federal political committee. C00174052
Name of Employer | Occupation
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 12 31 2002
Amount of Each Receipt this Period 2500.00
Refund of Federal Contribution
Transaction ID: SA16.8753

SUBTOTAL of Receipts This Page (optional) ▶ **4500.00**

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: PAGE 55 / 61
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JOE PITTS
Mailing Address
P.O. BOX 775
City | State | Zip Code
UNIONVILLE | PA | 19375
FEC ID number of contributing federal political committee. C00310136
Name of Employer | Occupation
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 31 2002
Amount of Each Receipt this Period: 1000.00
Refund of federal political contribution
Transaction ID: SA16.8751

B. Full Name (Last, First, Middle Initial)
GEPHARDT FOR PRESIDENT COMMITTEE INC
Mailing Address
80 F STREET NW 8TH FLOOR
City | State | Zip Code
WASHINGTON | DC | 20001
FEC ID number of contributing federal political committee. C00212365
Name of Employer | Occupation
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 12 31 2002
Amount of Each Receipt this Period: 1500.00
Refund of Federal Political Contribution
Transaction ID: SA16.8749

C. Full Name (Last, First, Middle Initial)
Hoosiers Supporting Buyer for Congress
Mailing Address
200 N. Main St. PO Box 172
City | State | Zip Code
Monticello | IN | 47960
FEC ID number of contributing federal political committee.
Name of Employer | Occupation
Receipt For: 2002
Primary X General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 16 2002
Amount of Each Receipt this Period: 1000.00
Refund of Federal Campaign Contribution
Transaction ID: SA16.8744

SUBTOTAL of Receipts This Page (optional) ▶ **3500.00**

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: PAGE 56 / 61
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Paul Hickey for Governor
Mailing Address
P.O. Box 1222
City: Cheyenne | State: WY | Zip Code: 82003-1222

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 16 2002

Amount of Each Receipt this Period: 250.00

Refund of state political contribution

Transaction ID: SA16.8745

B.
Full Name (Last, First, Middle Initial)
People for English
Mailing Address
PO Box 1940
City: Erie | State: PA | Zip Code: 16507

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 16 2002

Amount of Each Receipt this Period: 1000.00

Refund of federal political contribution

Transaction ID: SA16.8746

C.
Full Name (Last, First, Middle Initial)
People for English
Mailing Address
PO Box 1940
City: Erie | State: PA | Zip Code: 16507

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 12 16 2002

Amount of Each Receipt this Period: 2000.00

Refund of Federal Political Contribution

Transaction ID: SA16.8747

SUBTOTAL of Receipts This Page (optional) ▶ **3250.00**

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: PAGE 57 / 61
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

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

Mailing Address
PO BOX 5577 MANHATTANVILLE STA

City State Zip Code
NEW YORK NY 10027

FEC ID number of contributing federal political committee. C00302422

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
12 16 2002

Amount of Each Receipt this Period
5000.00

Refund of Federal Political Contribution

Transaction ID: SA16.8748

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

Mailing Address
PO BOX 575

City State Zip Code
BROOKFIELD WI 53008

FEC ID number of contributing federal political committee. C00083428

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
12 31 2002

Amount of Each Receipt this Period
2500.00

Refund of Federal Campaign Contribution

Transaction ID: SA16.8754

C.

SUBTOTAL of Receipts This Page (optional) ▶	**7500.00**
TOTAL This Period (last page this line number only) ▶	**18750.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 61
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A. Full Name (Last, First, Middle Initial)
Northern Trust Bank
Mailing Address
8501 W. Higgins Road
City | State | Zip Code
Chicago | IL | 60631

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
2744.83

Date of Receipt
12 06 2002

Amount of Each Receipt this Period
20.49

Interest

Transaction ID: SA17.8757

B. Full Name (Last, First, Middle Initial)
Northern Trust Bank
Mailing Address
8501 W. Higgins Road
City | State | Zip Code
Chicago | IL | 60631

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
2898.94

Date of Receipt
12 12 2002

Amount of Each Receipt this Period
154.11

CD Interest

Transaction ID: SA17.8755

C. Full Name (Last, First, Middle Initial)
Scudder Investments Service Company
Mailing Address
P.O. Box 219154
City | State | Zip Code
Kansas City | MO | 64121-7197

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1876.03

Date of Receipt
12 31 2002

Amount of Each Receipt this Period
118.92

Dividend interest

Transaction ID: SA17.8756

SUBTOTAL of Receipts This Page (optional) ▶ **293.52**

TOTAL This Period (last page this line number only) ▶ **293.52**

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)

American Association of Oral and Maxillofacial Surgeons Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Northern Trust Bank

Mailing Address

8501 W. Higgins Road

City: Chicago | State: IL | Zip Code: 60631

Purpose of Disbursement: Banking fees

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 12 06 2002

Amount of Each Disbursement this Period: 26.60

Transaction ID: SB21B.8758

B.

C.

SUBTOTAL of Disbursements This Page (optional) ▶	**26.60**
TOTAL This Period (last page this line number only) ▶	**26.60**

SCHEDULE D

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) [X] 9 [ ] 10

NAME OF COMMITTEE (In Full)
American Association of Oral and Maxillofacial Surgeons Political Action Committee

A Full Name (Last, First, Middle Initial) of Debtor or Creditor
Illinois Department of Revenue

Mailing Address
PO Box 19008

City: Springfield State: IL ZIP Code: 62794-9008

Nature of Debt (Purpose):
State Taxes Owed to Committee

Outstanding Balance Beginning This Period: 455.00

Transaction ID: SD9.8816

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	455.00

B Full Name (Last, First, Middle Initial) of Debtor or Creditor
Illinois Department of Revenue

Mailing Address
PO Box 19008

City: Springfield State: IL ZIP Code: 62794-9008

Nature of Debt (Purpose):
State Income tax

Outstanding Balance Beginning This Period: 0.00

Transaction ID: SD9.8763

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
178.00	0.00	178.00

C

1) **SUBTOTALS** This Period This Page (optional)	▶	**633.00**
2) **TOTALS** This Period (last page this line number only)	▶	**633.00**
3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)	▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

American Association of Oral and Maxillofacial Surgeons Political Action Committee

A Full Name (Last, First, Middle Initial) of Debtor or Creditor

U. S. Treasury

Mailing Address

Attention Tax Department

City: Kansas City | State: MO | ZIP Code: 64999

Nature of Debt (Purpose):

Federal Income Tax

Outstanding Balance Beginning This Period: 0.00

Transaction ID: SD10.8766

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1885.00	0.00	1885.00

B

C

1) **SUBTOTALS** This Period This Page (optional)	▶	**1885.00**
2) **TOTALS** This Period (last page this line number only)	▶	**1885.00**
3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)	▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only)	▶	