

**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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

ADDRESS (number and street) **8201 Greensboro Drive**
Suite 300
 Check if different than previously reported. (ACC) **McLean VA 22102**

2. **FEC IDENTIFICATION NUMBER** **C00168070** **CITY** **STATE** **ZIP CODE**
 3. **IS THIS REPORT** **NEW (N)** **OR** **AMENDED (A)**

4. **TYPE OF REPORT (Choose One)**
 (a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
 (b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
 (c) 12-Day **PRE**Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
 Election on _____ in the State of _____
 (d) 30-Day **Post**-Election Report for the: General (30G) Runoff (30R) Special (30S)
 Election on _____ in the State of _____

5. Covering Period 04 30 2002 through 07 15 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 **Tristan North**
 Signature of Treasurer Electronically Filed by Tristan North Date **07 15 2002**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^h0^y4^d ^D3⁰ ^v2⁰0² To: ^h0^y7^d ^D1⁵ ^v2⁰0²

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 ^v 2 ⁰ 0 ² | | 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period | 0.00 | |
| (c) Total Receipts (from Line 19) | 2150.00 | 2150.00 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 2150.00 | 2150.00 |
| 7. Total Disbursements (from Line 30) | 12000.00 | 12000.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | -9850.00 | -9850.00 |
| 9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D) | 0.00 | |

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^h0 ^m4 ^d30 ^y2002 To: ^h07 ^d15 ^y2002

| 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) | 250.00 | |
| (ii) Unitemized | 1900.00 | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 2150.00 | 2150.00 |
| (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) | 2150.00 | 2150.00 |
| 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 | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) | 2150.00 | 2150.00 |
| 20. Total Federal Receipts (subtract Line 18 from Line 19) | 2150.00 | 2150.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 12000.00 | 12000.00 |
| 24. Independent Expenditure (use Schedule E)..... | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶ | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶ | 12000.00 | 12000.00 |
| 31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶ | 12000.00 | 12000.00 |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans) from Line 11(d), page 3)..... | 2150.00 | 2150.00 |
| 33. Total Contribution Refunds (from Line 28(d))..... | 0.00 | 0.00 |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32)..... | 2150.00 | 2150.00 |
| 35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶ | 0.00 | 0.00 |
| 36. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶ | 0.00 | 0.00 |

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

| | | | | | | | | |
|--|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | | | | | PAGE 5 / 8 | |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |

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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. Mr. Harvey Hal

Mailing Address
1001 21st Street

City State Zip Code
Bakersfield CA 93301

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2002

FEC ID number of contributing federal political committee.
 Amount of Each Receipt this Period
250.00

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

Transaction ID: SA11A1.4134

B.

C.

| | | |
|--|---|---------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 250.00 |
| TOTAL This Period (last page this line number only) | ▶ | 250.00 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 8

| | | | | |
|------------------------------|-----------------------------|--|------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 |
| <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c |
| <input type="checkbox"/> 29 | | | | |

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

| | | | | |
|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Jim Nussle for Congress Committee | | | Date of Disbursement 06 / 27 / 2002 | |
| Mailing Address PO Box 324 City: Manchester State ID: Zip Code: 52057 | | | Amount of Each Disbursement this Period 1000.00 | |
| Purpose of Disbursement Contribution Candidate Name | | | Category/ Type | |
| Office Sought: House Senate President | | Disbursement For: 2002 Primary X General Other (specify) ▼ | | |
| State: District: | | Transaction ID: SB23.4143 | | |

| | | | | |
|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Luther for Congress Volunteer Committee | | | Date of Disbursement 06 / 27 / 2002 | |
| Mailing Address 1399 Avenue North Suite 220 City: Oakdale State: MN Zip Code: 55128 | | | Amount of Each Disbursement this Period 1000.00 | |
| Purpose of Disbursement Contribution Candidate Name | | | Category/ Type | |
| Office Sought: House Senate President | | Disbursement For: 2002 Primary X General Other (specify) ▼ | | |
| State: District: | | Transaction ID: SB23.4146 | | |

| | | | | |
|---|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Mike Ross for Congress | | | Date of Disbursement 05 / 07 / 2002 | |
| Mailing Address PO Box 360 City: Prescott State: AZ Zip Code: 71857 | | | Amount of Each Disbursement this Period 500.00 | |
| Purpose of Disbursement Contribution Candidate Name | | | Category/ Type | |
| Office Sought: House Senate President | | Disbursement For: 2002 X Primary General Other (specify) ▼ | | |
| State: District: | | Transaction ID: SB23.4156 | | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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| | | | | |
|------------------------------|-----------------------------|--|------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 |
| <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c |
| <input type="checkbox"/> 29 | | | | |

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

| | | | | |
|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee | | | Date of Disbursement 05 / 07 / 2002 | |
| Mailing Address 320 First Street NW City: Washington State: DC Zip Code: 20003 | | | Amount of Each Disbursement this Period 5000.00 | |
| Purpose of Disbursement Contribution Candidate Name | | | Category/ Type | |
| Office Sought: House Senate President Disbursement For: 2002 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | Transaction ID: SB23.415B | |

| | | | | |
|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Rangel for Congress | | | Date of Disbursement 05 / 17 / 2002 | |
| Mailing Address PO Box 5577 City: Manhattanville Sta State: NY Zip Code: 10027 | | | Amount of Each Disbursement this Period 2000.00 | |
| Purpose of Disbursement Contribution Candidate Name | | | Category/ Type | |
| Office Sought: House Senate President Disbursement For: 2002 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | Transaction ID: SB23.4152 | |

| | | | | |
|--|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Mr. Pat Toomey/ Pat Toomey for Congress | | | Date of Disbursement 06 / 27 / 2002 | |
| Mailing Address 9D2 Union Blvd. City: Allentown State: PA Zip Code: 18109 | | | Amount of Each Disbursement this Period 500.00 | |
| Purpose of Disbursement Contribution Candidate Name Pat Toomey for Congress Committee | | | Category/ Type | |
| Office Sought: House Senate President Disbursement For: 2002 Primary General <input checked="" type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | Transaction ID: SB23.4139 | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 7500.00 |
| TOTAL This Period (last page this line number only) ▶ | |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 8

| | | | | |
|------------------------------|-----------------------------|--|------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 |
| <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c |
| | | | | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Wally Herger for Congress | | Date of Disbursement 05 / 13 / 2002 |
| Mailing Address PO Box 1500 City: Chico State: CA Zip Code: 95927 | | Amount of Each Disbursement this Period 1000.00 |
| Purpose of Disbursement Contribution | Candidate Name | Category/ Type |
| Candidate Name | | |
| Office Sought: House Senate President | Disbursement For: 2002 Primary X General Other (specify) ▼ | Transaction ID: SB23.414B |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Walsh for Congress Committee | | Date of Disbursement 06 / 13 / 2002 |
| Mailing Address PO Box 1974 City: Syracuse State: NY Zip Code: 13201 | | Amount of Each Disbursement this Period 1000.00 |
| Purpose of Disbursement Contribution | Candidate Name | Category/ Type |
| Candidate Name | | |
| Office Sought: House Senate President | Disbursement For: 2002 Primary X General Other (specify) ▼ | Transaction ID: SB23.415D |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Walsh for Congress Committee | | Date of Disbursement 06 / 13 / 2002 |
| Mailing Address PO Box 1974 City: Syracuse State: NY Zip Code: 13201 | | Amount of Each Disbursement this Period 0.00 |
| Purpose of Disbursement | Candidate Name | Category/ Type |
| Candidate Name | | |
| Office Sought: House Senate President | Disbursement For: 2002 X Primary General Other (specify) ▼ | Transaction ID: SB23.416Z |
| State: District: | | |

| | | |
|--|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 12000.00 |