

RECEIVED
FEC MAIL ROOM

2002 JUL 20 P 12:31

Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

1. NAME OF
COMMITTEE (in full)

USE FEC MAILING LABEL
OR TYPE OR PRINT

Exempt: If typing, type
over the lines.

12FB4MS

American Association of Preferred Provider Organizations
Political Action Committee

ADDRESS (number and street)

1501 Pennsylvania Avenue

Suite 900

Check if different
than previously
reported. (ACU)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00352922

3. IS THIS
REPORT

XX

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
Year-End Report (YE)

July 31 Mid-Year
Report (Non-election
Year Only) (MY)

Termination Report
(TER)

(b) Monthly
Report
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)
Non-Election
Year Only

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)
Non-Election
Year Only

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (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 01 2002

through

06 30 2002

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

Type or Print Name of Treasurer

Karen Greenrose, Asst. Treasurer

Signature of Treasurer

Date

07 12 2002

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

Office
Use
Only

FEC FORM 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name American Association of Preferred Provider
Organizations Political Action Committee

Report Covering the Period: From: 04 01 2002 To: 06 30 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		4,448.27
(b) Cash on Hand at Beginning of Reporting Period	8,611.52	
(c) Total Receipts (from Line 19)	0.00	12,850.00
(e) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8,611.52	17,298.27
7. Total Disbursements (from Line 30)	555.00	9,241.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(e))	8,056.52	8,056.52
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
990 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name **American Association of Preferred Provider
Organizations Political Action Committee**

Report Covering the Period: From: **04 01 2002** To: **06 30 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	0.00	
(i) Itemized (use Schedule A)	0.00	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	0.00	12,850.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	0.00	12,850.00
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 26, 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)	0.00	12,850.00
20. Total Federal Receipts (transfer Line 19 from Line 19)	0.00	12,850.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

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	555.00	5,741.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	555.00	5,741.75
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	3,500.00
24. Independent Expenditures (see Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (see Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Local Made	0.00	0.00
28. Refunds of Contributions to:		
(a) Individual Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as POCs)	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)	555.00	9,241.75
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	555.00	9,241.75
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	12,850.00
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	0.00	12,850.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	555.00	9,241.75
36. Offset to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)	555.00	9,241.75

**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 1 OF 2	
<input checked="" type="checkbox"/> 21a	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 25	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29

Any information copied from such Reports and Statements may not be used or used by any person for the purpose of seeking 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 Preferred Provider Organizations Political Action Committee**

Full Name (Last, First, Middle Initial) A. Staken, Karen S.		Date of Disbursement 05 08 2002
Mailing Address 48 Poplar Avenue		Amount of Each Disbursement this Period 450.00
City Wheeling	State WV	
Zip Code 26003		Category/Type 001
Purpose of Disbursement Federal Election Compliance		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	State: District	

Full Name (Last, First, Middle Initial) B. SunTrust Bank		Date of Disbursement 04 02 2002
Mailing Address PO Box 85024		Amount of Each Disbursement this Period 35.00
City Richmond	State VA	
Zip Code 23285		Category/Type 001
Purpose of Disbursement Electronic Funds Debit		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	State: District	

Full Name (Last, First, Middle Initial) C. SunTrust Bank		Date of Disbursement 05 02 2002
Mailing Address PO Box 85024		Amount of Each Disbursement this Period 35.00
City Richmond	State VA	
Zip Code 23285		Category/Type 001
Purpose of Disbursement Electronic Funds Debit		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	State: District	

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

2025 RELEASE UNDER E.O. 14176

**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)

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

Any information copied from such Reports and Statements may not be used or used by any person for the purpose of soliciting contributions or for connected 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 Preferred Provider Organizations Political Action Committee**

A. Full Name (Last, First, Middle Initial) SunTrust Bank		Date of Disbursement 05 04 2002	
Mailing Address PO Box 85024		Amount of Each Disbursement This Period 35.00	
City Richmond	State VA	Zip Code 23285	Category/ Type 001
Purpose of Disbursement Electronic Funds Debit			
Candidate Name 			
Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District			
B. Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		Amount of Each Disbursement This Period	
City	State	Zip Code	Category/ Type
Purpose of Disbursement			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District			
C. Full Name (Last, First, Middle Initial)		Date of Disbursement	
Mailing Address		Amount of Each Disbursement This Period	
City	State	Zip Code	Category/ Type
Purpose of Disbursement			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District			

TOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	555.00

2002-03-28 10:00 AM

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked <hr/> and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>etc</i>	7-20-03
PREPARER	DATE PREPARED