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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 ▼ — Example: If typing, type over the lines

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

ADDRESS (number and street) ▼ 555 East Wells Street, Suite 1100

☐ Check if different than previously reported. (ACC)

CITY ▲ Milwaukee — STATE ▲ WI — ZIPCODE ▲ 53202 - 3823

2. FEC IDENTIFICATION NUMBER ▼ C00324780

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report(Q1)
- ☐ July 15 Quarterly Report(Q2)
- ☐ October 15 Quarterly Report(Q3)
- ☐ January 31 Quarterly Report(YE)
- ☐ July 31 Mid-Year Report(Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12G)

Election on ☐ ☐ ☐ in the State of ☐

(d) 30-Day Post -Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ☐ ☐ ☐ in the State of ☐

5. Covering Period 01 01 2010 through 03 31 2010

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

Type or Print Name of Treasurer Dr. William R. Little, MD

Signature of Treasurer X Dr. William R. Little MD Date 04 13 2010

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

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FEC FORM 3X (Rev. 02/2003)

10030002288

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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

Report Covering the Period: From: MM 01 DD 01 YYYY 2010 To: MM 03 DD 31 YYYY 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 YYYY 2010		194622.71
(b) Cash on Hand at Begining of Reporting Period	194622.71	
(c) Total Receipts (from Line 19)	12105.30	12105.30
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	206728.01	206728.01
7. Total Disbursements (from Line 31)	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	206728.01	206728.01
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

10030300289

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICAN ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

Report Covering the Period: From: MM 01 DD 01 YYYY 2010 To: MM 03 DD 31 YYYY 2010

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)	1750.00	1750.00
(ii) Unitemized	10171.00	10171.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	11921.00	11921.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	11921.00	11921.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	184.30	184.30
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12105.30	12105.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12105.30	12105.30

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	0.00	0.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11921.00	11921.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11921.00	11921.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 8
(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 ACADEMY OF EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE AAEM PAC

A.
Full Name (Last, First, Middle Initial): Dr. David N. Dubois
Mailing Address: PO Box 2368
City: Columbia State: MD Zip Code: 21045-2368
FEC ID number of contributing federal political committee: C
Name of Employer: Rotorua, NZ Hospital
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11A1.4353
Amount of Each Receipt this Period: 200.00
Individual Contributions over $200

B.
Full Name (Last, First, Middle Initial): Dr. Mark A. Foppe
Mailing Address: 859 Hanover Way
City: Lakeland State: FL Zip Code: 33813
FEC ID number of contributing federal political committee: C
Name of Employer: South Central Regional Me-d. Ct
Occupation: Doctor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11A1.4354
Amount of Each Receipt this Period: 250.00
Individual Contributions over $200

C.
Full Name (Last, First, Middle Initial): Dr. Thomas Heniff
Mailing Address: 8903 Waterside Circle
City: Indianapolis State: IN Zip Code: 46278
FEC ID number of contributing federal political committee: C
Name of Employer: Clarian Arnett Hospital
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11A1.4355
Amount of Each Receipt this Period: 200.00
Individual Contributions over $200

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

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 8
(check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial): Dr. Deborah Natale
Mailing Address: 35065 McKnight Court
City: Round Hill State: VA Zip Code: 20141
FEC ID number of contributing federal political committee: C
Name of Employer: Winchester Memorial
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11A1.4357
Amount of Each Receipt this Period: 200.00
Individual Contributions over $200

B.
Full Name (Last, First, Middle Initial): Dr. Chad D. Smith
Mailing Address: 11905 Andretti Avenue
City: Bakersfield State: CA Zip Code: 93312
FEC ID number of contributing federal political committee: C
Name of Employer: Midmichigan Hospital
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11A1.4359
Amount of Each Receipt this Period: 200.00
Individual Contributions over $200

C.
Full Name (Last, First, Middle Initial): Dr. David Lloyd Strauss
Mailing Address: 6701 N. Charles Street
City: Towson State: MD Zip Code: 21204
FEC ID number of contributing federal political committee: C
Name of Employer: GBMC
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11A1.4361
Amount of Each Receipt this Period: 200.00
Individual Contributions over $200

SUBTOTAL of Receipts This Page (optional) ..... ▶ 600.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 8
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Dr. Philip Trolano

Mailing Address Dept. Of Emergency Medicine
945 N. 12th Street

City: Milwaukee
State: WI
Zip Code: 53233

FEC ID number of contributing federal political committee. C

Name of Employer: Aurora Sinai Medical Center

Occupation:

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11A1.4363

Amount of Each Receipt this Period
500.00

Individual Contributions over $200

10030300295

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

TOTAL This Period (last page this line number only) ..... ▶ 1750.00

Federal Election Commission
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☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
SD	4/16/10
PREPARER	DATE PREPARED

(3/2005)

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