# 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 SOCIETY OF PLASTIC SURGEONS. PlastyPAC

ADDRESS (number and street) ▼ 444 EAST ALGONQUIN RD

Check if different than previously reported. (ACC)

CITY ▲ ARLINGTON HEIGHTS | STATE ▲ IL | ZIPCODE ▲ 60005 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00249342

3. IS THIS REPORT — X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- 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 07 01 2001 through 12 31 2001

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

Type or Print Name of Treasurer: Mr. William Seward

Signature of Treasurer: Electronically Filed by Mr. William Seward — Date 01 30 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 1/2001)

# SUMMARY PAGE
## OF RECEIPTS AND DISBURSEMENTS



Write or Type Committee Name
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

Report Covering the Period: From: 07 01 2001 To: 12 31 2001

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|---|
| 6. | (a) Cash on Hand January 1 2001 | | 67078.60 |
| | (b) Cash on Hand at Begining of Reporting Period ..... | 71381.54 | |
| | (c) Total Receipts (from Line 19) ..... | 73829.00 | 96542.00 |
| | (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) ..... | 145210.54 | 163620.60 |
| 7. | Total Disbursements (from Line 30) ..... | 54618.49 | 73028.55 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ..... | 90592.05 | 90592.05 |
| 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



Write or Type Committee Name

AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

Report Covering the Period: From: 07 01 2001 To: 12 31 2001

| 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) | 51019.00 | |
| (ii) Unitemized | 22810.00 | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶ | 73829.00 | 96542.00 |
| (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) ▶ | 73829.00 | 96542.00 |
| 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) ▶ | 73829.00 | 96542.00 |
| 20. Total Federal Receipts (subtract Line 18 from Line 19) ▶ | 73829.00 | 96542.00 |

# 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 | 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 | 31000.00 | 44000.00 |
| 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 | 23618.49 | 29028.55 |
| 30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶ | 54618.49 | 73028.55 |
| 31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶ | 54618.49 | 73028.55 |
| **III. Net Contributions/Operating Expenditures** | | |
| 32. Total Contributions (other than loans) from Line 11(d), page 3) | 73829.00 | 96542.00 |
| 33. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32) | 73829.00 | 96542.00 |
| 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: PAGE 5 / 73
(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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Scott Aaronson, MD
Mailing Address
1221 North Indian Canyon Drive
City | State | Zip Code
Palm Springs | CA | 92262
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 09 25 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4622

**B.**
Full Name (Last, First, Middle Initial)
Govind Acharya, MD
Mailing Address
5121 N. Central Ave.
City | State | Zip Code
Phoenix | AZ | 85012
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 25 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5395

**C.**
Full Name (Last, First, Middle Initial)
Abd Alghanem, MD
Mailing Address
1020 Charter Dr., Ste. B
City | State | Zip Code
Flint | MI | 48532
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 24 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4859

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Mohammed Asher Ali, MD
Mailing Address
1275 Woodward Ave., Ste. 104
City | State | Zip Code
Bloomfield Hills | MI | 48302
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 30 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4480

**B.**
Full Name (Last, First, Middle Initial)
Al Aly, MD
Mailing Address
Univ. Iowa Hosp. Sect. Plast. Surg 200 Hawkin Dr.-2988 Jpp
City | State | Zip Code
Iowa City | IA | 52242
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 24 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4812

**C.**
Full Name (Last, First, Middle Initial)
Abd Amin, Md
Mailing Address
3735 Easton Nazareth Hwy.,Ste. 302
City | State | Zip Code
Easton | PA | 18045
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 26 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4925

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

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Scott Andochick, MD
Mailing Address
81 Thomas Johnson Court
City | State | Zip Code
Frederick | MD | 21702
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 26 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4454

**B.**
Full Name (Last, First, Middle Initial)
Scott Andochick, MD
Mailing Address
81 Thomas Johnson Court
City | State | Zip Code
Frederick | MD | 21702
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 24 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.5398

**C.**
Full Name (Last, First, Middle Initial)
Gosset Anson, MD
Mailing Address
7135 W. Sahara
City | State | Zip Code
Las Vegas | NV | 89117
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 26 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4452

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

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

## SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Derrick Antell MD, DDS
Mailing Address
850 Park Avenue
City | State | Zip Code
New York | NY | 10021
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 301.00
Date of Receipt: 09 05 2001
Amount of Each Receipt this Period: 301.00
**Transaction ID:** SA11A1.4552

**B.** Full Name (Last, First, Middle Initial)
Amy Arnold, MD
Mailing Address
2001 NE 46th Court, Ste. 5
City | State | Zip Code
Fort Lauderdale | FL | 33308
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 15 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.5087

**C.** Full Name (Last, First, Middle Initial)
Laurence Arnold, MD
Mailing Address
5353 N. Federal Highway, Ste. 301
City | State | Zip Code
Fort Lauderdale | FL | 33308
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 26 2001
Amount of Each Receipt this Period: 500.00
**Transaction ID:** SA11A1.4765

**SUBTOTAL** of Receipts This Page (optional) ▶ **1051.00**

**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 9 / 73
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Joel Atchison, MD
Mailing Address
4009 6th Ave., Ste. 45
City | State | Zip Code
Kearney | NE | 68845
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 07 26 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4458

**B.** Full Name (Last, First, Middle Initial)
Harvey Austin, MD
Mailing Address
1776 Old Meadow Road
City | State | Zip Code
Mclean | VA | 22102
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 11 12 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4908

**C.** Full Name (Last, First, Middle Initial)
Peramjit Bajaj, MD
Mailing Address
6205 N. Santa Fe, Ste. 105
City | State | Zip Code
Oklahoma | OK | 73116
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 10 31 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4851

**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 10 / 73
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Gary Baker, MD
Mailing Address
2801 Wyandotte St., Ste. 1061
City | State | Zip Code
Kansas City | MO | 64108
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 13 / 2001
Amount of Each Receipt this Period: 300.00
**Transaction ID:** SA11A1.4716

**B.** Full Name (Last, First, Middle Initial)
Eduardo Barrosso, MD
Mailing Address
8950 North Kendall Drive, Ste. 100D
City | State | Zip Code
Miami | FL | 33176
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 30 / 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4486

**C.** Full Name (Last, First, Middle Initial)
Eduardo Barrosso, MD
Mailing Address
8950 North Kendall Drive, Ste. 100
City | State | Zip Code
Miami | FL | 33176
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 29 / 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.5389

**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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FOR LINE NUMBER: PAGE 11 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Robert Bashore, MD
Mailing Address
280 Sykes Creek Parkway, Ste. A
City | State | Zip Code
Merritt Island | FL | 32953
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 07 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4544

**B.** Full Name (Last, First, Middle Initial)
Harold Beam, MD
Mailing Address
300 Hebron Ave., Ste. 101
City | State | Zip Code
Glastonbury | CT | 06033
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 10 19 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4876

**C.** Full Name (Last, First, Middle Initial)
Glenn Becker, MD
Mailing Address
390 E. 38th St. , Ste. 32E
City | State | Zip Code
New York | NY | 10016
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 19 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4906

**SUBTOTAL** of Receipts This Page (optional) ▶ **1000.00**

**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 12 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Jonathan Berman, MD
Mailing Address
16244 S. Military Trail, Ste. 670
City | State | Zip Code
Delray Beach | FL | 33484
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 30 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4937

**B.** Full Name (Last, First, Middle Initial)
David Branch, Md
Mailing Address
885 Union St., Ste. 215
City | State | Zip Code
Bangor | ME | 04401
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 19 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4736

**C.** Full Name (Last, First, Middle Initial)
Stephen Bresnick, MD
Mailing Address
16633 Ventura Blvd., Ste. 110
City | State | Zip Code
Encino | CA | 91436
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 30 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4464

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 13 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Wilfred Brown, MD
Mailing Address
530 Middlebury Rd., Ste. 106B
City | State | Zip Code
Middlebury | CT | 06762
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 01 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4921

**B.** Full Name (Last, First, Middle Initial)
Fernando Celaro, MD
Mailing Address
Torre San Pablo 103 Calle South Cruz #68
City | State | Zip Code
Bayamon | PR | 00961
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 02 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4847

**C.** Full Name (Last, First, Middle Initial)
Bruce Carter, MD
Mailing Address
875 Oak St., S.E., Ste 4060
City | State | Zip Code
Salem | OR | 97301
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 23 2001
Amount of Each Receipt this Period: 500.00
**Transaction ID:** SA11A1.4526

**SUBTOTAL** of Receipts This Page (optional) ▶ **1000.00**

**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 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Richard Carver, MD
Mailing Address
2805 5th Street, Ste. 250
City | State | Zip Code
Rapid City | SD | 57701-7360
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 12 / 18 / 2001
Amount of Each Receipt this Period: 400.00
**Transaction ID:** SA11A1.4984

**B.** Full Name (Last, First, Middle Initial)
Jeff Chapman, MD
Mailing Address
4833 Meadowcreek Dr., SW
City | State | Zip Code
Fargo | ND | 58104
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 27 / 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4793

**C.** Full Name (Last, First, Middle Initial)
Woodward Coleman, MD
Mailing Address
414 Navarro, Ste. 1616
City | State | Zip Code
San Antonio | TX | 78205
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 09 / 17 / 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4810

**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) for each category of the Detailed Summary Page

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(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Robert Cooper, MD
Mailing Address
77 N. Centre Avenue, Ste. 306
City | State | Zip Code
Rockville Center | NY | 11570
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 17 / 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4602

**B.** Full Name (Last, First, Middle Initial)
Ralph Cozart, MD
Mailing Address
8171 Rourk St.
City | State | Zip Code
Myrtle Beach | SC | 29572
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 12 / 14 / 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4974

**C.** Full Name (Last, First, Middle Initial)
Craig Cressman, MD
Mailing Address
2400 Samaritan Dr., Ste. 206
City | State | Zip Code
San Jose | CA | 55124
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 / 13 / 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4987

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 / 73
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
David Creech, MD
Mailing Address
7776 S. Pointe Pkwy West, Ste. 135
City: Phoenix | State: AZ | Zip Code: 85044
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 29 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5115

**B.**
Full Name (Last, First, Middle Initial)
James Cullington, MD
Mailing Address
1010 W. 8th Street
City: Austin | State: TX | Zip Code: 78703
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 05 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4825

**C.**
Full Name (Last, First, Middle Initial)
Richard A. D'Amico, MD
Mailing Address
180 N. Dean St. Suite 3 - NE
City: Englewood, | State: NJ | Zip Code: 07631
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 10 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5122

**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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Jefferey Darrow, MD
Mailing Address
170 Commonwealth Ave.
City | State | Zip Code
Boston | MA | 02116
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 15 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4695

**B.** Full Name (Last, First, Middle Initial)
Kenneth Dieffenbach, MD
Mailing Address
2633 Napoleon
City | State | Zip Code
New Orleans | LA | 70115
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 27 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4532

**C.** Full Name (Last, First, Middle Initial)
Donald Ditmars, Jr.
Mailing Address
Henry Ford Hospital 2799 W. Grand Blvd
City | State | Zip Code
Detroit | MI | 48202
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 07 12 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5125

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Terry Dubrow, MD
Mailing Address
1617 Westcliff Dr., Ste. 100
City | State | Zip Code
Newport Beach | CA | 92660
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 23 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4592

**B.**
Full Name (Last, First, Middle Initial)
Deason Dunegan, MD
Mailing Address
303 William Ave., Ste. 1421
City | State | Zip Code
Huntsville | AL | 35801
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 01 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4879

**C.**
Full Name (Last, First, Middle Initial)
Mark Ebergach, MD
Mailing Address
14012 US Highway 19
City | State | Zip Code
Hudson | FL | 34667
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 25 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5126

**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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Brian Eichenberg, MD
Mailing Address
28999 Front St., Ste. 102
City | State | Zip Code
Temecula | CA | 92590
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 20 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5128

**B.** Full Name (Last, First, Middle Initial)
John Fagg, MD
Mailing Address
2901 Maplewood Ave.
City | State | Zip Code
Winston-Salem | NC | 27103
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 05 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4823

**C.** Full Name (Last, First, Middle Initial)
Thomas Fewell, MD
Mailing Address
206 W. County Line Rd., Ste. 350
City | State | Zip Code
Highlands Ranch | CO | 80129
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 15 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4982

**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 20 / 73
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Charles Feagin, MD
Mailing Address
4300 W. Main St. Ste. 43
City: Dothan | State: AL | Zip Code: 36305
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 11 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5130

**B.**
Full Name (Last, First, Middle Initial)
Joseph Franco, MD
Mailing Address
48 Tomlin Circle
City: Burr Ridge | State: IL | Zip Code: 60521
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 31 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5140

**C.**
Full Name (Last, First, Middle Initial)
Heather Furnas, MD
Mailing Address
2465 Summerfield Rd
City: Santa Rosa | State: CA | Zip Code: 55405
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 11 28 2001
Amount of Each Receipt this Period: 20.00
Transaction ID: SA11A1.5146

**SUBTOTAL** of Receipts This Page (optional) ▶ **770.00**

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Heather Furnas, MD
Mailing Address
2485 Summerfield Rd
City | State | Zip Code
Santa Rosa | CA | 95405
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 29 2001
Amount of Each Receipt this Period: 20.00
Transaction ID: SA11A1.5148

**B.** Full Name (Last, First, Middle Initial)
F. Nicholas Gahhos, MD
Mailing Address
135 San Marco Crive
City | State | Zip Code
Venice | FL | 34285-3231
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 07 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4857

**C.** Full Name (Last, First, Middle Initial)
Julio Garcia, MD
Mailing Address
30117 W. Charleston Blvd., Ste.80
City | State | Zip Code
Las Vegas | NV | 89102
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 14 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4626

**SUBTOTAL** of Receipts This Page (optional) ▶ **1020.00**

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Daniel Garritano, Md
Mailing Address
483 S. Briarcliff Dr.
City | State | Zip Code
Canfield | OH | 44406
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 25 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4834

**B.** Full Name (Last, First, Middle Initial)
Peter Gee, MD
Mailing Address
3 Woodland Rd., Ste. 318
City | State | Zip Code
Stoneham | MA | 02180
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 16 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4738

**C.** Full Name (Last, First, Middle Initial)
Douglas Gervais, MD
Mailing Address
4825 Olson Memorial Hwy., Ste. 200
City | State | Zip Code
Minneapolis | MN | 55422
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 23 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4757

**SUBTOTAL** of Receipts This Page (optional) ▶ **1000.00**

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Nourollah Ghorbani MD
Mailing Address
130 La Casa Via, Ste. 102
City | State | Zip Code
Walnut Creek | CA | 94598
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 22 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5159

**B.** Full Name (Last, First, Middle Initial)
Steven Gitt, MD
Mailing Address
3811 E. Bell Rd., Ste. 202
City | State | Zip Code
Phoenix | AZ | 85032
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 03 2001
Amount of Each Receipt this Period: 400.00
Transaction ID: SA11A1.4884

**C.** Full Name (Last, First, Middle Initial)
Joseph Giunta, MD
Mailing Address
4600 King St., Ste. 4-R
City | State | Zip Code
Alexandria | VA | 22302
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 03 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5161

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

**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 24 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Scot Glasberg, MD
Mailing Address
42A East 74th Street
City | State | Zip Code
New York | NY | 10021
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 216.00
Date of Receipt: 12 30 2001
Amount of Each Receipt this Period: 18.00
**Transaction ID:** SA11A1.5168

**B.** Full Name (Last, First, Middle Initial)
Barry Goldenberg, MD
Mailing Address
200 East End Ave.
City | State | Zip Code
New York | NY | 10128
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 27 2001
Amount of Each Receipt this Period: 500.00
**Transaction ID:** SA11A1.4855

**C.** Full Name (Last, First, Middle Initial)
Sandy Gonzalez, MD
Mailing Address
200 Calle Reina Eugenia
City | State | Zip Code
Guaynabo | PR | 00969
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 07 2001
Amount of Each Receipt this Period: 500.00
**Transaction ID:** SA11A1.4970

**SUBTOTAL** of Receipts This Page (optional) ▶ **1018.00**

**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 25 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Robert Grant, MD
Mailing Address
Columbia Univ. Div. Plastic Surger Dep 601 161 Ft. Wash. Ave.
City State Zip Code
New York NY 10032
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 12 2001
Amount of Each Receipt this Period: 300.00
**Transaction ID:** SA11A1.5169

**B.** Full Name (Last, First, Middle Initial)
Robert Greper, MD
Mailing Address
2801 Randolph
City State Zip Code
Charlotte NC 28211
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 22 2001
Amount of Each Receipt this Period: 300.00
**Transaction ID:** SA11A1.4512

**C.** Full Name (Last, First, Middle Initial)
Behrman Guyuron, MD
Mailing Address
29017 Cedar Rd.
City State Zip Code
Lyndhurst OH 44124
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 06 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.5173

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 26 / 73
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Philip Haeck MD

Mailing Address
Cabrini Medical Tower 901 Boren Ave., Ste. 1650

City | State | Zip Code
Seattle | WA | 98104

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 07 2001

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.4815

**B.** Full Name (Last, First, Middle Initial)
Thomas Hagerty, MD

Mailing Address
117 Marys Ave., Ste. 204

City | State | Zip Code
Kingston | NY | 12401

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 17 2001

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.4748

**C.** Full Name (Last, First, Middle Initial)
C. Franklin Halbert, MD

Mailing Address
P.O. Box 11546

City | State | Zip Code
Atlanta | GA | 30355

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 30 2001

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.4947

**SUBTOTAL** of Receipts This Page (optional) ▶ **1000.00**

**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 27 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Karl Hepcic, MD, DDS
Mailing Address
1825 Pinion Rd., Ste. E
City | State | Zip Code
Elko | NV | 89801
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 18 2001
Amount of Each Receipt this Period: 150.00
Transaction ID: SA11A1.5430

**B.** Full Name (Last, First, Middle Initial)
Michelle Hardaway, MD
Mailing Address
29355 Northwestern Hwy., Ste. 100
City | State | Zip Code
Southfield | MI | 48034
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 11 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4807

**C.** Full Name (Last, First, Middle Initial)
Steven Herber, MD
Mailing Address
1030 Main St.
City | State | Zip Code
St. Helena | CA | 94574
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 19 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5193

**SUBTOTAL** of Receipts This Page (optional) ▶ **950.00**

**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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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Karl Hatt, MD
Mailing Address
500 W. 10th Place, Ste. 124
City | State | Zip Code
Mesa | AZ | 85201
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 09 27 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5195

**B.** Full Name (Last, First, Middle Initial)
William Hickerson, MD
Mailing Address
1220 George C. Wilson Dr.
City | State | Zip Code
Augusta | GA | 30907
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 24 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4516

**C.** Full Name (Last, First, Middle Initial)
H. Louis Hill, MD
Mailing Address
Tallahasse Plastic Surgery 1704 Riggins Rd.
City | State | Zip Code
Tallahasse | FL | 32308
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 07 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5198

**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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
William Huffaker, MD
Mailing Address
456 N. New Ballas Rd.
City: St. Louis | State: MO | Zip Code: 63141
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 04 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4829

**B.**
Full Name (Last, First, Middle Initial)
Ben Hugo, MD
Mailing Address
1101 First Colonial Rd., Ste. 201
City: Virginia Beach | State: VA | Zip Code: 23454
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 20 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5200

**C.**
Full Name (Last, First, Middle Initial)
Vincent Hung, MD
Mailing Address
800 Fairmount Ave., Ste 320
City: Pasadena | State: CA | Zip Code: 91105
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 26 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5202

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Robert Improta MD
Mailing Address
2460 Ponderosa Dr. N., Ste. A-117
City | State | Zip Code
Camarillo | CA | 93010
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 03 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4650

**B.** Full Name (Last, First, Middle Initial)
Clyde Ishii MD
Mailing Address
Queens Physician Office Building 1329 Lusitana St., Ste. 502
City | State | Zip Code
Honolulu | HI | 96813
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 15 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4933

**C.** Full Name (Last, First, Middle Initial)
Ted Jackson, MD
Mailing Address
415 Morris St #200
City | State | Zip Code
Charleston | WV | 25301
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 10 03 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4882

**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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Michael Jazayeri, MD
Mailing Address
9735 Wilshire Blvd., Ste. 211
City | State | Zip Code
Beverly Hills | CA | 90212
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 22 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5204

**B.** Full Name (Last, First, Middle Initial)
Debra Johnson, MD
Mailing Address
95 Scripps Ave.
City | State | Zip Code
Sacramento | CA | 95825
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 20 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5206

**C.** Full Name (Last, First, Middle Initial)
Dean Johnston, MD
Mailing Address
4106 W. Lake Mary Blvd., Suite 212
City | State | Zip Code
Lake Mary | FL | 32746
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 15 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5210

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

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

# SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Martin Kessen, MD
Mailing Address
617 23rd St., Ste.5
City | State | Zip Code
Ashland | KY | 41101

FEC ID number of contributing federal political committee.

Name of Employer
Self
Occupation
Physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 17 2001

Amount of Each Receipt this Period
300.00

Transaction ID: SA11A1.5212

**B.** Full Name (Last, First, Middle Initial)
Peter Key, MD
Mailing Address
2355 N. Wyatt Ave. Ste. 111
City | State | Zip Code
Tucson | AZ | 85712

FEC ID number of contributing federal political committee.

Name of Employer
Self
Occupation
Physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 03 2001

Amount of Each Receipt this Period
300.00

Transaction ID: SA11A1.5217

**C.** Full Name (Last, First, Middle Initial)
Jimmy Kee, MD
Mailing Address
10 Lynoak Cove
City | State | Zip Code
Jackson | TN | 38305

FEC ID number of contributing federal political committee.

Name of Employer
Self
Occupation
Physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 12 2001

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.4914

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

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

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

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FOR LINE NUMBER: PAGE 33 / 73
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Karl Kenfield, MD
Mailing Address
320 Santa Fe Drive, Ste. 107
City | State | Zip Code
Encinitas | CA | 92024
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 12 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5219

**B.** Full Name (Last, First, Middle Initial)
Geoffrey Keyes, MD
Mailing Address
9201 Sunset Blvd., Ste. 611
City | State | Zip Code
Los Angeles | CA | 90069
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 14 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4985

**C.** Full Name (Last, First, Middle Initial)
Roy Kim, MD
Mailing Address
45 Castro Street
City | State | Zip Code
San Francisco | CA | 94114
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 15 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5226

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Alan Kisner, MD

Mailing Address
Plastic Surgery Center Long Island 100 E. Main St.

City | State | Zip Code
Huntington | NY | 11743

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 08 / 19 / 2001

Amount of Each Receipt this Period: 300.00

Transaction ID: SA11A1.5227

**B.** Full Name (Last, First, Middle Initial)
Michele Koo, MD

Mailing Address
333 S. Kirkwood, Ste. 203

City | State | Zip Code
St. Louis | MO | 63122

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt: 10 / 23 / 2001

Amount of Each Receipt this Period: 250.00

Transaction ID: SA11A1.4787

**C.** Full Name (Last, First, Middle Initial)
George Kokkos, MD

Mailing Address
22370 Bluemound Rd.

City | State | Zip Code
Waukesha | WI | 53186

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 08 / 2001

Amount of Each Receipt this Period: 250.00

Transaction ID: SA11A1.5232

**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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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Lawrence Korpeck MD
Mailing Address
200 Glades Road, Ste. 1
City | State | Zip Code
Boca Raton | FL | 33432
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 09 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4916

**B.**
Full Name (Last, First, Middle Initial)
Norm Leaf, MD
Mailing Address
436 N. Bedford Dr., Ste. 103
City | State | Zip Code
Beverly Hills | CA | 90210
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 07 31 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5244

**C.**
Full Name (Last, First, Middle Initial)
David Leber, MD
Mailing Address
2101 N. Front St
City | State | Zip Code
Harrisburg | PA | 17110
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 10 29 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4899

**SUBTOTAL** of Receipts This Page (optional) ▶ **1100.00**

**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 36 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Jean-Francois Lefaivre, MD

Mailing Address
Univ. of S. Carolina, Surgery Dept 2 Richland Medical Park, Ste. 302

City | State | Zip Code
Columbia | SC | 29203

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt: 11 19 2001

Amount of Each Receipt this Period: 250.00

Transaction ID: SA11A1.4900

**B.** Full Name (Last, First, Middle Initial)
Carl Lentz, MD, III

Mailing Address
120 N. Seneca

City | State | Zip Code
Daytona Beach | FL | 32114

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 350.00

Date of Receipt: 08 25 2001

Amount of Each Receipt this Period: 100.00

Transaction ID: SA11A1.5251

**C.** Full Name (Last, First, Middle Initial)
Ronald Levandusky, MD

Mailing Address
105 East 35th St.

City | State | Zip Code
New York | NY | 10016

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 10 15 2001

Amount of Each Receipt this Period: 100.00

Transaction ID: SA11A1.5253

**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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FOR LINE NUMBER: PAGE 37 / 73
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Victor Lewis, MD
Mailing Address
201 E. Huron Suite 12-240
City State Zip Code
Chicago IL 60611
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 05 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4832

**B.** Full Name (Last, First, Middle Initial)
Robert Lay, MD
Mailing Address
150 Carnation Drive, Ste. 4
City State Zip Code
Freedom CA 95019
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 30 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4488

**C.** Full Name (Last, First, Middle Initial)
Paul Loewenstein
Mailing Address
2900 N. Mayfair Rd. Ste. 795
City State Zip Code
Milwaukee WI 53226
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 14 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5256

**SUBTOTAL** of Receipts This Page (optional) ▶ **1100.00**

**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 38 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
William Loutfy, MD
Mailing Address
10400 Academy NE., Ste 230
City | State | Zip Code
Albuquerque | NM | 87111
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 01 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4949

**B.**
Full Name (Last, First, Middle Initial)
Richard Lung, MD
Mailing Address
475 Biltmore Way, Ste. 310
City | State | Zip Code
Coral Gables | FL | 33134
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 09 14 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4582

**C.**
Full Name (Last, First, Middle Initial)
Eric Markitt, MD
Mailing Address
2425 East St., Ste. 14
City | State | Zip Code
Concord | CA | 94520
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 20 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5263

**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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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Eric Mariotti MD
Mailing Address
2425 East St., Ste. 14
City | State | Zip Code
Concord | CA | 94520
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 25 2001
Amount of Each Receipt this Period: 100.00
Transaction ID: SA11A1.4767

**B.** Full Name (Last, First, Middle Initial)
Michael McGuire, MD
Mailing Address
1901 20th Street
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 07 27 2001
Amount of Each Receipt this Period: 10.00
Transaction ID: SA11A1.5268

**C.** Full Name (Last, First, Middle Initial)
Michael McGuire, MD
Mailing Address
1901 20th Street
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 330.00
Date of Receipt: 08 27 2001
Amount of Each Receipt this Period: 10.00
Transaction ID: SA11A1.5269

**SUBTOTAL** of Receipts This Page (optional) ▶ **120.00**

**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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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Michael McGuire, MD
Mailing Address
1301 20th Street
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 09 27 2001
Amount of Each Receipt this Period: 10.00
Transaction ID: SA11A1.5270

**B.** Full Name (Last, First, Middle Initial)
Michael McGuire, MD
Mailing Address
1301 20th Street
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 10 27 2001
Amount of Each Receipt this Period: 10.00
Transaction ID: SA11A1.5271

**C.** Full Name (Last, First, Middle Initial)
Michael McGuire, MD
Mailing Address
1301 20th Street
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 11 27 2001
Amount of Each Receipt this Period: 10.00
Transaction ID: SA11A1.5272

**SUBTOTAL** of Receipts This Page (optional) ▶ **30.00**

**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 41 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Michael McGuire, MD
Mailing Address
1301 20th Street
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 370.00
Date of Receipt: 12 27 2001
Amount of Each Receipt this Period: 10.00
Transaction ID: SA11A1.5273

**B.** Full Name (Last, First, Middle Initial)
Michael Meininger, MD
Mailing Address
43900 Garfield Rd., Ste. 104
City | State | Zip Code
Clinton Twp | MI | 48038
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 22 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4778

**C.** Full Name (Last, First, Middle Initial)
Marcus McMin
Mailing Address
9200 SW Barnes Rd.
City | State | Zip Code
Portland | OR | 97225
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 14 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5276

**SUBTOTAL** of Receipts This Page (optional) ▶ **560.00**

**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 42 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Roger Mixter, MD
Mailing Address
400 W. Silver Spring Dr.
City | State | Zip Code
Milwaukee | WI | 53217
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 28 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4450

**B.** Full Name (Last, First, Middle Initial)
Christian Mogelvang, MD
Mailing Address
1351 Pine Street
City | State | Zip Code
Naples | FL | 34104
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 18 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4800

**C.** Full Name (Last, First, Middle Initial)
Dennis Monteiro, MD
Mailing Address
1288 Valley Forge Rd., Ste. 64 PO Box 604
City | State | Zip Code
Valley Forge | PA | 19482
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 21 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5284

**SUBTOTAL** of Receipts This Page (optional) ▶ **1100.00**

**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 43 / 73
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
John Mullins, MD
Mailing Address
35 Collier Rd., Ste. 675
City | State | Zip Code
Atlanta | GA | 30309
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 01 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4886

**B.** Full Name (Last, First, Middle Initial)
Jamsheed Nejmi, MD
Mailing Address
201 Union Ave.
City | State | Zip Code
Bridewater | NJ | 08807
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 22 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4782

**C.** Full Name (Last, First, Middle Initial)
Joel Nasca, MD
Mailing Address
5233 Dijon Dr.
City | State | Zip Code
Baton Rouge | LA | 70806
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physcian
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 25 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5288

**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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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Richard Nesmith, MD, DMD
Mailing Address
6801 NW 9th Blvd., Ste. 2
City | State | Zip Code
Gainesville | FL | 32605
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 08 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5290

**B.**
Full Name (Last, First, Middle Initial)
Scott Newman, MD
Mailing Address
970 N. Broadway, Ste. 107
City | State | Zip Code
Yonkers | NY | 10710
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 25 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4842

**C.**
Full Name (Last, First, Middle Initial)
William Newton, MD
Mailing Address
704 Gaslight Blvd.
City | State | Zip Code
Lufkin | TX | 75904
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 12 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4795

**SUBTOTAL** of Receipts This Page (optional) ▶ **1000.00**

**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

FOR LINE NUMBER: PAGE 45 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Kenneth Odinet, MD
Mailing Address
155 Hospital Dr., Ste. 410
City: Lafayette | State: LA | Zip Code: 70503
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 / 18 / 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5293

**B.** Full Name (Last, First, Middle Initial)
Ferdinand Ofodile, MD
Mailing Address
133 E. 73rd St.
City: New York | State: NY | Zip Code: 10021
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 / 28 / 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4991

**C.** Full Name (Last, First, Middle Initial)
Roger Oldham, MD
Mailing Address
10215 Fernwood Rd., Ste. 412
City: Bethesda | State: MD | Zip Code: 20817
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 11 / 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5296

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

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Richard Orr, MD
Mailing Address
520 Mary St., Ste. 330
City: Evansville. State: IN Zip Code: 47710
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 29 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5298

**B.** Full Name (Last, First, Middle Initial)
John Osborn, MD
Mailing Address
95 Scripps Dr.
City: Sacramento State: CA Zip Code: 95825
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 26 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5300

**C.** Full Name (Last, First, Middle Initial)
Richard Pecunia
Mailing Address
#4 Medical Blvd.
City: Hattiesburg State: MS Zip Code: 39401
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 22 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4763

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Georg Peltier, MD
Mailing Address
HCMC
City | State | Zip Code
Minneapolis | MN | 55415
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 09 15 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4580

**B.** Full Name (Last, First, Middle Initial)
John Pierce, MD
Mailing Address
3070 College Street, Suite 202
City | State | Zip Code
Beaumont | TX | 77701
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 18 2001
Amount of Each Receipt this Period: 200.00
Transaction ID: SA11A1.5317

**C.** Full Name (Last, First, Middle Initial)
Lori Polacek, MD
Mailing Address
1524 Atwood Ave., Ste. 343
City | State | Zip Code
Johnston | RI | 02919
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4953

**SUBTOTAL** of Receipts This Page (optional) ▶ **700.00**

**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 SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
David Pratt, MD
Mailing Address
4005 Colby Ave.
City | State | Zip Code
Everett | WA | 98201
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 04 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5318

**B.** Full Name (Last, First, Middle Initial)
Bradford Prescott, MD
Mailing Address
1455 Montego, Ste. 204
City | State | Zip Code
Walnut Creek | CA | 94598
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 20 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5320

**C.** Full Name (Last, First, Middle Initial)
Clara Rivera, MD
Mailing Address
112-47 Queens Blvd., Ste. 106
City | State | Zip Code
Forest Hills | NY | 11375
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 01 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5328

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 49 / 73
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Clara Rivera, MD
Mailing Address
112-47 Queens Blvd., Ste. 106
City | State | Zip Code
Forest Hills | NY | 11375

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 25 2001
Amount of Each Receipt this Period: 250.00

Transaction ID: SA11A1.4751

**B.** Full Name (Last, First, Middle Initial)
Karen Roche, MD
Mailing Address
9370 McKnight Rd., Ste. 404
City | State | Zip Code
Pittsburgh | PA | 15237

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

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

Date of Receipt: 07 28 2001
Amount of Each Receipt this Period: 300.00

Transaction ID: SA11A1.5331

**C.** Full Name (Last, First, Middle Initial)
Howard Rosenberg, MD
Mailing Address
2204 Grant Rd., Ste. 201
City | State | Zip Code
Mountain View | CA | 94040

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

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

Date of Receipt: 10 01 2001
Amount of Each Receipt this Period: 300.00

Transaction ID: SA11A1.5336

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 50 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Malcolm Roth, MD
Mailing Address
Brookdale Hospital Med. Ctr. One Brookdale Plaza
City State Zip Code
Brooklyn NY 11212
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 09 27 2001
Amount of Each Receipt this Period: 1000.00
Transaction ID: SA11A1.4639

**B.** Full Name (Last, First, Middle Initial)
Leonard Roudner, MD
Mailing Address
550 Biltomre Way, Ste. 890
City State Zip Code
Coral Gables FL 33134
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 13 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4983

**C.** Full Name (Last, First, Middle Initial)
Cayce Rumsey, III, MD
Mailing Address
520 US Highway A1A, Ste. 203
City State Zip Code
Ponte Vedra Beach FL 32082
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 18 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5405

**SUBTOTAL** of Receipts This Page (optional) ▶ **1800.00**

**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 / 73
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
S. Larry Schlesinger, MD
Mailing Address
33 Lono Ave. Ste. 300
City: Kahului | State: HI | Zip Code: 96732
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 24 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4564

**B.**
Full Name (Last, First, Middle Initial)
Jeffery Seltzinger, MD
Mailing Address
440 Taylor Rd., Ste. 3250
City: Montgomery | State: AL | Zip Code: 36117-3588
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 09 20 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4616

**C.**
Full Name (Last, First, Middle Initial)
Alan Serure, MD
Mailing Address
7900 SW 62nd Place, Ste. 200
City: S. Miami | State: FL | Zip Code: 33143
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 26 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5347

**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 52 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Carol Shapiro, MD
Mailing Address
1940 Opitz Blvd.
City | State | Zip Code
Woodbridge | VA | 22191
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 04 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4821

**B.** Full Name (Last, First, Middle Initial)
Kimberly Short, MD
Mailing Address
8051 S. Emerson Ave., Ste. 175
City | State | Zip Code
Indianapolis | IN | 46237
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 14 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5351

**C.** Full Name (Last, First, Middle Initial)
Robert Sigal, MD
Mailing Address
1776 Old Meadow Road
City | State | Zip Code
Mclean | VA | 22102
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4910

**SUBTOTAL** of Receipts This Page (optional) ▶ **1300.00**

**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 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Joel Singer, MD
Mailing Address
32 Imperial Ave.
City | State | Zip Code
Westport | CT | 06880

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

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

Date of Receipt: 11 27 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4929

**B.** Full Name (Last, First, Middle Initial)
Raymond Smith, MD
Mailing Address
926 Penn Ave.
City | State | Zip Code
Wyomissing | PA | 19610

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

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

Date of Receipt: 12 28 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4989

**C.** Full Name (Last, First, Middle Initial)
Scott Spear, MD
Mailing Address
Georgetown Univ. Hosptal 3800 Reservoir Rd., NW
City | State | Zip Code
Washington | DC | 20007

FEC ID number of contributing federal political committee.

Name of Employer: Self
Occupation: Physician

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

Date of Receipt: 10 11 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4897

**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 54 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Russel Stokes, MD
Mailing Address
2320 Bath Street, Ste. 307
City | State | Zip Code
Santa Barbara | CA | 93105
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 30 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4496

**B.** Full Name (Last, First, Middle Initial)
Elis Texin, MD
Mailing Address
8035 Providence Rd., Ste. 315
City | State | Zip Code
Charlotte | NC | 28277
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 26 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.5359

**C.** Full Name (Last, First, Middle Initial)
Anne Taylor, MD
Mailing Address
5969 E. Broad St., Ste. 403
City | State | Zip Code
Columbus | OH | 43213
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 22 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5361

**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 55 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Dennis Thompson, MD
Mailing Address
2001 Santa Monica Blvd. Ste. 1180-W
City State Zip Code
Santa Monica CA 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 30 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4668

**B.** Full Name (Last, First, Middle Initial)
Michael Tolson, MD
Mailing Address
1296 Simms St., Ste. B
City State Zip Code
Gainesville GA 30501
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 24 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5367

**C.** Full Name (Last, First, Middle Initial)
Jon Paul Trevisani, MD
Mailing Address
413 Lake Howell Road
City State Zip Code
Maitland FL 32751
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 24 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4528

**SUBTOTAL** of Receipts This Page (optional) ▶ **850.00**

**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 / 73
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Fredrick Valauri MD

Mailing Address
3 East 76th St.

City | State | Zip Code
New York | NY | 10021

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Physician

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date
500.00

Date of Receipt
09 24 2001

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.5370

**B.** Full Name (Last, First, Middle Initial)
Paul Venek, MD

Mailing Address
9485 Mentor Avenue, Ste. 100

City | State | Zip Code
Mentor | OH | 44060

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Physician

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date
500.00

Date of Receipt
09 20 2001

Amount of Each Receipt this Period
500.00

Transaction ID: SA11A1.4806

**C.** Full Name (Last, First, Middle Initial)
Peter Van Hoy, MD

Mailing Address
2228 Cahaba Valley Dr.

City | State | Zip Code
Birmingham | AL | 35242

FEC ID number of contributing federal political committee.

Name of Employer
Self

Occupation
Physician

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date
250.00

Date of Receipt
07 31 2001

Amount of Each Receipt this Period
250.00

Transaction ID: SA11A1.5373

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

**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 / 73
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Benjamin Van Raalte, MD
Mailing Address
1228 East Rusholme St., Ste. 1D8
City | State | Zip Code
Davenport | IA | 52801
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 26 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5375

**B.** Full Name (Last, First, Middle Initial)
Burr Von Maur, MD
Mailing Address
27800 Medical Center Dr., Ste. 351
City | State | Zip Code
Mission Viejo | CA | 92651
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 12 21 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4980

**C.** Full Name (Last, First, Middle Initial)
James Wade, MD
Mailing Address
5233 Dijon Drive
City | State | Zip Code
Baton Rouge | LA | 70806
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 10 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4548

**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 58 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
James Wells, MD
Mailing Address
2880 Atlantic Ave., Ste. 290
City: Long Beach | State: CA | Zip Code: 90806
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physicican
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 06 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4811

**B.** Full Name (Last, First, Middle Initial)
Brian West, MD
Mailing Address
2 Medical Plaza, Ste.130
City: Roseville | State: CA | Zip Code: 95661
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 14 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.4899

**C.** Full Name (Last, First, Middle Initial)
Steven White, MD
Mailing Address
1275 21st Avenue North
City: Myrtle Beach | State: SC | Zip Code: 29577
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 18 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.4744

**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 59 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Richard Winters, MD
Mailing Address
1425 Glenburnie Rd.
City | State | Zip Code
New Bern | NC | 28562
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 28 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.5383

**B.** Full Name (Last, First, Middle Initial)
Gareth Wooten, MD
Mailing Address
1301 20th St., Ste. 470
City | State | Zip Code
Santa Monica | CA | 90404
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 26 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.5385

**C.** Full Name (Last, First, Middle Initial)
Karl Wustrack MD
Mailing Address
1830 Blankenship Rd., Ste. 100
City | State | Zip Code
West Linn | OR | 97068
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 30 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.4840

**SUBTOTAL** of Receipts This Page (optional) ▶ **1000.00**

**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 60 / 73
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Sean Younai MD
Mailing Address
16311 Ventura Blvd., Ste. 1010
City: Encino | State: CA | Zip Code: 91436
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 28 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4441

**B.** Full Name (Last, First, Middle Initial)
V. Leroy Young, MD
Mailing Address
1040 N. Mason Rd., Ste. 208
City: St. Louis | State: MO | Zip Code: 63141
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12 07 2001
Amount of Each Receipt this Period: 250.00
**Transaction ID:** SA11A1.4951

**C.** Full Name (Last, First, Middle Initial)
Paul Zwiebel, MD, DMD
Mailing Address
206 W. County Line Rd., Ste. 210
City: Littleton | State: CO | Zip Code: 80129
FEC ID number of contributing federal political committee.
Name of Employer: Self
Occupation: Physician
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 02 2001
Amount of Each Receipt this Period: 300.00
**Transaction ID:** SA11A1.5389

**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: (check only one) PAGE 61 / 73

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

A.

Full Name (Last, First, Middle Initial)
Paul Zwiebel MD

Mailing Address
206 W. County Line Rd., Ste. 210

| City | State | Zip Code |
|---|---|---|
| Littleton | CO | 80129 |

FEC ID number of contributing federal political committee.

| Name of Employer | Occupation |
|---|---|
| Self | Physician |

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 15 2001

Amount of Each Receipt this Period
300.00

Transaction ID: SA11A1.4588

B.

C.

| | |
|---|---|
| **SUBTOTAL** of Receipts This Page (optional) ▶ | **300.00** |
| **TOTAL** This Period (last page this line number only) ▶ | **51019.00** |

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

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

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



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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Shelley BERKLEY FOR CONGRESS

Mailing Address
3069 CONQUISTA COURT
City: LAS VEGAS | State: NV | Zip Code: 89121

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 08 01 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5011

**B.** Full Name (Last, First, Middle Initial)
BENJAMIN L CARDIN

Mailing Address
9 WHITEBRIDGE COURT
City: BALTIMORE | State: MD | Zip Code: 21208

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5414

**C.** Full Name (Last, First, Middle Initial)
JEFFREY WILLIAM COLYER

Mailing Address
12806 W 122ND STREET
City: OVERLAND PARK | State: KS | Zip Code: 66213

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 12 20 2001

Amount of Each Disbursement this Period: 5000.00

Transaction ID: SB23.5085

**SUBTOTAL** of Disbursements This Page (optional) ▶ **7000.00**

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

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

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

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



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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
ELIZABETH DOLE

Mailing Address
712 SOUTH FULTON STREET
City: SALISBURY | State: NC | Zip Code: 28144

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5047

**B.** Full Name (Last, First, Middle Initial)
DREIER FOR CONGRESS COMMITTEE

Mailing Address
PO BOX 1110
City: COVINA | State: CA | Zip Code: 91722

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: CA District: 28

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5055

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

Mailing Address
462 CALIFORNIA RD
City: BRONXVILLE | State: NY | Zip Code: 10708

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: NY District: 17

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.5059

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
ANNA G ESHOO

Mailing Address
40 ISABELLA AVENUE
City: ATHERTON | State: CA | Zip Code: 94027

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House ☐ Senate ☐ President
State: CA District: 14

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 01 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5024

**B.** Full Name (Last, First, Middle Initial)
FITZGERALD FOR SENATE INC

Mailing Address
50 NORTH BROCKWAY STREET SUITE 4-B
City: PALATINE | State: IL | Zip Code: 60067

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House X Senate ☐ President
State: IL District: 00

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5043

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

Mailing Address
607 14TH STREET NW SUITE 600
City: WASHINGTON | State: DC | Zip Code: 20005

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 01 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5018

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
BENJAMIN A CONGRESSMAN GILMAN

Mailing Address
16 ORCHARD STREET
City: MIDDLETOWN | State: NY | Zip Code: 10940

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House ☐ Senate ☐ President
State: NY District: 20

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 / 15 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.5053

**B.** Full Name (Last, First, Middle Initial)
HEATHER WILSON FOR CONGRESS

Mailing Address
PO BOX 14070
City: ALBUQUERQUE | State: NM | Zip Code: 87191

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House ☐ Senate ☐ President
State: NM District: 01

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 / 01 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.5030

**C.** Full Name (Last, First, Middle Initial)
Tim HUTCHINSON FOR SENATE

Mailing Address
PO BOX 999
City: ROGERS | State: AR | Zip Code: 72757

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House X Senate ☐ President
State: AR District: 00

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 / 01 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5009

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Tim HUTCHINSON FOR SENATE

Mailing Address
PO BOX 998
City: ROGERS | State: AR | Zip Code: 72757

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: House / X Senate / President — State: AR District: 00

Disbursement For: 2002 — X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5051

**B.** Full Name (Last, First, Middle Initial)
NANCY L JOHNSON

Mailing Address
141 SOUTH MOUNTAIN DR
City: NEW BRITAIN | State: CT | Zip Code: 06052

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: X House / Senate / President — State: CT District: 05

Disbursement For: 2002 — X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5063

**C.** Full Name (Last, First, Middle Initial)
Ric KELLER FOR CONGRESS

Mailing Address
PO BOX 1453
City: ORLANDO | State: FL | Zip Code: 32802

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: X House / Senate / President — State: FL District: 08

Disbursement For: 2002 — X Primary / General / Other (specify)

Date of Disbursement: 08 01 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.5028

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address
PO BOX 1155
City: SENECA | State: SC | Zip Code: 29679

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House ☒ Senate ☐ President
State: SC District: 00

Disbursement For: 2002 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 / 15 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5045

**B.** Full Name (Last, First, Middle Initial)
MAC COLLINS FOR CONGRESS

Mailing Address
PO BOX 35
City: JONESBORO | State: GA | Zip Code: 30237

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 03

Disbursement For: 2002 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 / 15 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5036

**C.** Full Name (Last, First, Middle Initial)
MARTIN FROST CAMPAIGN COMMITTEE

Mailing Address
400 S ZANG #1414
City: DALLAS | State: TX | Zip Code: 75208

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 24

Disbursement For: 2002 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 / 15 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5049

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

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

Mailing Address
1900 DEPOSIT GUARANTY TOWER 333 TEXAS STREET
City State Zip Code
SHREVEPORT LA 71101

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House ☐ Senate ☐ President
State: LA District: 04

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement
08 01 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.5026

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

Mailing Address
CLAUSSEN ROAD PO BOX 489
City State Zip Code
AUGUSTA CA 30907

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement
08 01 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.5022

**C.** Full Name (Last, First, Middle Initial)
Frank PALLONE FOR CONGRESS

Mailing Address
PO BOX 3176
City State Zip Code
LONG BRANCH NJ 07740

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House ☐ Senate ☐ President
State: NJ District: 06

Disbursement For: 2002
X Primary ☐ General ☐ Other (specify)

Date of Disbursement
08 01 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.5014

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
CLIFFORD B STEARNS

Mailing Address
2071 SE 54TH TERRACE
City: OCALA | State: FL | Zip Code: 34471

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5057

**B.** Full Name (Last, First, Middle Initial)
TED STRICKLAND

Mailing Address
PO BOX 580
City: LUCASVILLE | State: OH | Zip Code: 45648

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 08 01 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.5032

**C.** Full Name (Last, First, Middle Initial)
TEXANS FOR HENRY BONILLA

Mailing Address
PO BOX 17292
City: SAN ANTONIO | State: TX | Zip Code: 78217

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: TX District: 23

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.5034

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
WILLIAM M THOMAS

Mailing Address
PO BOX 395
City: BAKERSFIELD | State: CA | Zip Code: 93302

Purpose of Disbursement:

Candidate Name:

Category/ Type:

Office Sought: X House / Senate / President
State: CA District: 22

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 08 01 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5417

**B.** Full Name (Last, First, Middle Initial)
JOHN THUNE

Mailing Address
PO BOX 516
City: SIOUX FALLS | State: SD | Zip Code: 57101

Purpose of Disbursement:

Candidate Name:

Category/ Type:

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5069

**C.** Full Name (Last, First, Middle Initial)
TIM JOHNSON FOR SOUTH DAKOTA INC

Mailing Address
PO BOX 1859
City: SIOUX FALLS | State: SD | Zip Code: 57101

Purpose of Disbursement:

Candidate Name:

Category/ Type:

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

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5039

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

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
TORRICELLI FOR U S SENATE INC

Mailing Address
1300 CONNECTICUTT AVE NW SUITE 600
City: WASHINGTON | State: DC | Zip Code: 20036

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: 2002 / X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5067

**B.** Full Name (Last, First, Middle Initial)
NYDIA M VELAZQUEZ

Mailing Address
370 UNION STREET
City: BROOKLYN | State: NY | Zip Code: 11231

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: NY District: 12

Disbursement For: 2002 / X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5065

**C.** Full Name (Last, First, Middle Initial)
GERALD C 'JERRY' WELLER

Mailing Address
PO BOX 15263
City: WASHINGTON | State: DC | Zip Code: 20003

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: X House / Senate / President
State: IL District: 11

Disbursement For: 2002 / X Primary / General / Other (specify)

Date of Disbursement: 11 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.5041

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

**TOTAL** This Period (last page this line number only) ▶ **31000.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.** Full Name (Last, First, Middle Initial)
Membership Marketing Services

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach | State: VA | Zip Code: 23454

Purpose of Disbursement
Consulting Services

Candidate Name

Category/ Type

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

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 31 / 2001

Amount of Each Disbursement this Period: 5851.35

Transaction ID: SB29.5075

**B.** Full Name (Last, First, Middle Initial)
Membership Marketing Services

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach | State: VA | Zip Code: 23454

Purpose of Disbursement
Consulting Services

Candidate Name

Category/ Type

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

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 / 31 / 2001

Amount of Each Disbursement this Period: 4787.18

Transaction ID: SB29.5083

**C.** Full Name (Last, First, Middle Initial)
Membership Marketing Services

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach | State: VA | Zip Code: 23454

Purpose of Disbursement
Consulting Services

Candidate Name

Category/ Type

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

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 15 / 2001

Amount of Each Disbursement this Period: 3745.78

Transaction ID: SB29.5076

**SUBTOTAL** of Disbursements This Page (optional) ▶ **14164.31**

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

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF PLASTIC SURGEONS, PlastyPAC

**A.**
Full Name (Last, First, Middle Initial)
Membership Marketing Services

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach | State: VA | Zip Code: 23454

Purpose of Disbursement
Consulting Services

Candidate Name

Category/ Type

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

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 / 16 / 2001

Amount of Each Disbursement this Period: 5638.68

Transaction ID: SB29.5081

**B.**
Full Name (Last, First, Middle Initial)
Membership Marketing Services

Mailing Address
1280 Perimeter Parkway
City: Virginia Beach | State: VA | Zip Code: 23454

Purpose of Disbursement
Consulting Services

Candidate Name

Category/ Type

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

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 18 / 2001

Amount of Each Disbursement this Period: 2918.43

Transaction ID: SB29.5082

**C.**
Full Name (Last, First, Middle Initial)
Payments at Merchant Services

Mailing Address
PO Box 8600
City: Hagerstown | State: MD | Zip Code: 21741

Purpose of Disbursement

Candidate Name

Category/ Type

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

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 15 / 2001

Amount of Each Disbursement this Period: 897.07

Transaction ID: SB29.5394

**SUBTOTAL** of Disbursements This Page (optional) ▶ **9454.18**

**TOTAL** This Period (last page this line number only) ▶ **23618.49**