07/15/2010 11:25

Image# 10990877340

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) 8400 Westpark Drive ADDRESS (number and street) 2nd Floor Check if different than previously ٧A McLean 22102 5116 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS NEW **AMENDED** C00168070 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2010 06 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Denise Clark Type or Print Name of Treasurer Electronically Filed by Denise Clark 07 15 2010 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

Report Covering the Period:

From:

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 18 FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) <sup>D</sup> 30 м м 0 4 м м 0 6 D D 2010 2010 0 1

To:

_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1 2010 Y Y		24766.28
(b) Cash on Hand at Begining of Reporting Period	25961.10	
(c) Total Receipts (from Line 19)	4670.09	9287.54
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30631.19	34053.82
Total Disbursements (from Line 31)	10132.23	13554.86
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20498.96	20498.96
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

### For further information contact:

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

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

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 18

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From:

м м 0 4 <sup>D</sup> 0 1

<sup>Y</sup> 2010

n. 06

<sup>D</sup> 30

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	4400.04	7366.72
	(ii) Unitemized	250.00	1883.36
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	4650.04	9250.08
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4650.04	9250.08
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
1	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	20.05	37.46
	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
(	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4670.09	9287.54
	Total Federal Receipts (subtract Line 18(c) from Line 19)	4670.09	9287.54

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 18

	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)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	132.23	554.86
	Expenditures(c) Total Operating Expenditures	102.20	334.00
	(add 21(a)(i), (a)(ii) and (b))	132.23	554.86
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	10000.00	13000.00
24.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(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
	(add Lines 20(a), (b), and (c))		
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Lilies 30(a)(i), 30(a)(ii) aliu 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10132.23	13554.86
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	10132.23	13554.86

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 18

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	4650.04	9250.08
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	4650.04	9250.08
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	132.23	554.86
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	132.23	554.86

FE6AN026

П	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Na. 4	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
OI	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIAT	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> <b>A</b> .	Full Name (Last, First, Middle Initial) Dale Berry Mailing Address 1200 State Circle			Date of Receipt  O 6 1 0 2 0 1 0
	City Ann Arbor	State MI	Zip Code 48108	Transaction ID: SA11AI.7406  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00  Contribution
	Name of Employer Huron Valley Ambulance  Receipt For:  Primary  General  Other (specify) ▼	President		
3.	Full Name (Last, First, Middle Initial) Debora Mary Gault Mailing Address 5502 North West High	way		Date of Receipt  0 6 1 0 2 0 1 0
	City State Zip Code			Transaction ID: SA11AI.7411
	Waterford  FEC ID number of contributing federal political committee.	C	53185	Amount of Each Receipt this Period  125.00  Contribution
	Name of Employer AMR  Receipt For:  Primary General Other (specify) ▼		ral Reimbursements Year-to-Date  250.00	
	Full Name (Last, First, Middle Initial) Harvey L. Hall Mailing Address 1001 - 21st Street			Date of Receipt  0 4 1 2 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.7364
	Bakersfield FEC ID number of contributing federal political committee.	CA	93301	Amount of Each Receipt this Period 250.00
	Name of Employer Hall Ambulance Service	Occupation CEO	1	Contribution - March 10
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	
\[ \]	SUBTOTAL of Receipts This Page (optional)			625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOCIAT	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Harvey L. Hall  Mailing Address 1001 - 21st Street  City Bakersfield  FEC ID number of contributing federal political committee.  Name of Employer Hall Ambulance Service  Receipt For: Primary General Other (specify)	State CA C Occupation CEO Aggregate	Zip Code 93301 n Year-to-Date ▼	Date of Receipt  M M M D D D 2 2 0 1 0  Transaction ID: SA11AI.7365  Amount of Each Receipt this Period  250.00  Contribution - April 10
Full Name (Last, First, Middle Initial) Harvey L. Hall Mailing Address 1001 - 21st Street  City Bakersfield  FEC ID number of contributing federal political committee.  Name of Employer Hall Ambulance Service  Receipt For: Primary General Other (specify)	State CA C Occupation CEO Aggregate	Zip Code 93301  n  Year-to-Date ▼ 1250.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Harvey L. Hall  Mailing Address 1001 - 21st Street  City Bakersfield  FEC ID number of contributing federal political committee.  Name of Employer Hall Ambulance Service  Receipt For: Primary General Other (specify)	State CA C Occupation CEO Aggregate	Zip Code 93301	Date of Receipt  M M M D D D 2010  Transaction ID: SA11AI.7395  Amount of Each Receipt this Period  250.00  Contribution
SUBTOTAL of Receipts This Page (optional)			750.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	parate schedule(s) h category of the d Summary Page	FOR LINE NUMBER: PAGE 8 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be so e name and address of an	ld or used by any perso y political committee to	
AMERICAN AMBULANCE ASSOCIA	ΓΙΟΝ FEDERAL PAC	(AKA AMBU-PAC)	
Full Name (Last, First, Middle Initial) Russell Honeycutt  Mailing Address 223 Pebblebrook Lan	3		Date of Receipt
City	State Zip C	nde	0 4 1 0 2 0 1 0 Transaction ID: SA11AI.7369
Macon	GA 3122		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Hinson Systems/National Reimbu	Occupation Vice President		Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	ate ▼ 400.00	
Full Name (Last, First, Middle Initial) Russell Honeycutt	1		Date of Receipt
Mailing Address 223 Pebblebrook Lan	Э		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip C	ode	Transaction ID: SA11AI.7384
Macon	GA 3122	0	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Hinson Systems/National Reimbu	Occupation Vice President		Contribution
Receipt For:	Aggregate Year-to-D	ate <b>V</b>	7
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Russell Honeycutt			Date of Receipt
Mailing Address 223 Pebblebrook Lane			0 6 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip C		Transaction ID: SA11Al.7398
Macon	GA 3122	0	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00  Contribution
Name of Employer Hinson Systems/National Reimbu	Occupation Vice President		Continuation
Receipt For: Primary General	Aggregate Year-to-D	ate ▼	1
Other (specify)		600.00	
SUBTOTAL of Receipts This Page (optional)			300.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pename and address of any political committee.  TION FEDERAL PAC (AKA AMBU-PA)	
Full Name (Last, First, Middle Initial) Thomas McEntee  Mailing Address 8489 Sunshine Ln  City Riverside  FEC ID number of contributing federal political committee.  Name of Employer AMR  Receipt For: Primary General Other (specify)	State Zip Code CA 92508  C  Occupation  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M D D D 2010  Transaction ID: SA11AI.7418  Amount of Each Receipt this Period  125.00  Contribution
Full Name (Last, First, Middle Initial) James McPartlon  Mailing Address 1015 DiBella Dr  City Schenectady  FEC ID number of contributing federal political committee.  Name of Employer Mohawk Ambulance Services  Receipt For: Primary General Other (specify)	State Zip Code NY 12303  C  Occupation VP  Aggregate Year-to-Date   500.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Louis Meyer  Mailing Address 10644 N. Oakwilde Ar  City Stockton  FEC ID number of contributing federal political committee.  Name of Employer AMR  Receipt For: Primary General Other (specify)	Venue  State Zip Code CA 95212  C  Occupation CEO - Regional  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 10 2010  Transaction ID: SA11AI.7401  Amount of Each Receipt this Period  250.00  Contribution
SUBTOTAL of Receipts This Page (optional) .		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOCIATION	e name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Steve Murphy  Mailing Address 100 S Birch Rd #901  City Ft Lauderdale  FEC ID number of contributing federal political committee.  Name of Employer AMR  Receipt For: Primary General Other (specify)	State FL  C  Occupatio Exe VP  Aggregate	Zip Code 33316 on e Year-to-Date ▼	Date of Receipt    M   M   D   D   2 0 1 0
Full Name (Last, First, Middle Initial) Julie Ann Rose Mailing Address 1123 Chestnut Drive  City Ashtabula  FEC ID number of contributing federal political committee.  Name of Employer Community Care Ambulance  Receipt For: Primary General Other (specify)	1	Zip Code 44004  In e Director e Year-to-Date ▼ 333.36	Date of Receipt  M M M J D D J 2010  Transaction ID: SA11AI.7366  Amount of Each Receipt this Period  83.34  Contribution
Full Name (Last, First, Middle Initial) Julie Ann Rose  Mailing Address 1123 Chestnut Drive  City Ashtabula  FEC ID number of contributing federal political committee.  Name of Employer Community Care Ambulance  Receipt For: Primary General Other (specify)	_ '	Zip Code 44004  on e Director e Year-to-Date ▼ 416.70	Date of Receipt    M   M   D   D   2 0 1 0
SUBTOTAL of Receipts This Page (optional)			416.68

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A or	ny information copied from such Reports and for commercial purposes, other than using t	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOCIA	ATION FEDERAL PAC (AKA AMBU-PAC	C)
_	Full Name (Last, First, Middle Initial) Julie Ann Rose		Date of Receipt
	Mailing Address 1123 Chestnut Drive	Olds 7's Olds	06 10 2010
	City Ashtabula	State Zip Code OH 44004	Transaction ID: SA11AI.7410  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.34
	Name of Employer Community Care Ambulance	Occupation Executive Director	Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
	Full Name (Last, First, Middle Initial) Lauren Rubinson		Date of Receipt
	Mailing Address 123 Oakmont		0 6 1 0 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.7404
	Deerfield	IL 60015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer MEA Service	Occupation CEO	Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Randy Strozyk		Date of Receipt
	Mailing Address 9209 181 Street Ave	nue East	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.7368
	Bonney Lake FEC ID number of contributing federal political committee.	WA 98390	Amount of Each Receipt this Period  100.00
	Name of Employer American Medical Response	Occupation Vice President	Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
	NIDTOTAL of Descipto This Desc (entires)		433.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 18 (check only one)    X   11a		
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any perso g the name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOC	SIATION FEDERAL PAC (AKA AMBU-PAC)			
Full Name (Last, First, Middle Initial)  A. Randy Strozyk		Date of Receipt		
Mailing Address 9209 181 Street Av	venue East	0 5 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Bonney Lake	State Zip Code WA 98390	Transaction ID: SA11AI.7383  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer American Medical Response	Occupation Vice President	Contribution		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial)  Randy Strozyk		Date of Receipt		
Mailing Address 9209 181 Street Av	Mailing Address 9209 181 Street Avenue East			
City				
Bonney Lake  FEC ID number of contributing federal political committee.	WA 98390	Amount of Each Receipt this Period  100.00		
Name of Employer American Medical Response	Occupation Vice President	Contribution		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial) Ronald Thackery		Date of Receipt		
Mailing Address 9922 S. Silver Map	ole Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: SA11AI.7412		
Highlands Ranch FEC ID number of contributing federal political committee.	CO 80129	Amount of Each Receipt this Period 250.00		
Name of Employer American Medical Response	Occupation VP Risk Management	Contribution		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (options	al)	450.00		
	nber only)			

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for ea	separate schedule(s) sch category of the led Summary Page	FOR LINE NUMBER: PAGE 13 / 18 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and for for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOCIA	e name and address of a	any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Larry Wiersch Mailing Address 4846 Five Point Road  City New Tripoli  FEC ID number of contributing federal political committee.  Name of Employer Cetronia Ambulance  Receipt For:			Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: SA11AI.7408  Amount of Each Receipt this Period  250.00  Contribution
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kurt Williams  Mailing Address 1200 S Martin Luther	King	500.00	Date of Receipt  0 4 1 0 2 0 1 0
City	State Zip	Code	Transaction ID: SA11AI.7367
Las Vegas	NV 891	02	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		83.34 Contribution
Name of Employer American Medical Response	Occupation CEO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 333.36	
Full Name (Last, First, Middle Initial) Kurt Williams	L		Date of Receipt
Mailing Address 1200 S Martin Luther	King		0 5 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	•	Code	Transaction ID: SA11AI.7382
Las Vegas  FEC ID number of contributing federal political committee.	NV 891	02	Amount of Each Receipt this Period  83.34
Name of Employer American Medical Response	Occupation CEO		Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 416.70	
SUBTOTAL of Receipts This Page (optional) .	1	<b>&gt;</b>	416.68

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 14/18   (check only one)
Any or f	y information copied from such Reports and Stor commercial purposes, other than using the	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATI		· ·	
	Full Name (Last, First, Middle Initial) Kurt Williams			Date of Receipt
	Mailing Address 1200 S Martin Luther K	ing		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Las Vegas	State NV	Zip Code 89102	Transaction ID: SA11AI.7396  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00.02	83.34
	Name of Employer American Medical Response	Occupation	n	Contribution
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.04	
	Full Name (Last, First, Middle Initial) Gerald Zapolnik			Date of Receipt
	Mailing Address 1116 Rathfan Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Saline	State MI	Zip Code	Transaction ID: SA11AI.7370
	FEC ID number of contributing federal political committee.	C	48176	Amount of Each Receipt this Period  100.00
	Name of Employer Huron Valley Ambulance	Occupation VP Supp	n ort Operations	Contribution
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) Gerald Zapolnik			Date of Receipt
	Mailing Address 1116 Rathfan Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Saline	State MI	Zip Code 48176	Transaction ID: SA11AI.7385  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40170	100.00
	Name of Employer Huron Valley Ambulance	Occupation VP Supp	n ort Operations	Contribution
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
	JBTOTAL of Receipts This Page (optional)			283.34

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page		R LINE eck onl 11a 13	y one	MBER: e) 11b 14	11c 15	GE 15/18  12 16	17	
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso ress of any political committee to	n for tl solicit	he purp contrib	oose outior	of solicins from	iting co	ntributions ommittee.	
NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOCIA	TION FEDERA	AL PAC (AKA AMBU-PAC)							
Full Name (Last, First, Middle Initial) Gerald Zapolnik				Date of	Rec	eipt			
Mailing Address 1116 Rathfan Circle			0 6 1 0 2 0 1 0 Transaction ID: SA11AI.7399						
City	State	Zip Code							
<u>Saline</u>	MI	48176		Amoun	t of E	Each Re	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	C							100.00	
Name of Employer Huron Valley Ambulance	Occupation VP Suppo	ort Operations		ontrib	utior	n			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00							

SUBTOTAL of Receipts This Page (optional)	•	100.00
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	Mailing Address					0 0		16	<u> </u>	2010	,			
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		Senate President	X Pr		General									
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	Full Name (Last, EARL POMER Mailing Address City Fargo Purpose of Disbu	District: First, Middle Initial) OY FOR CONGRE Post Office Box	ESS 9336	te	Zip Code	Са	011 tegory/ Гуре		Date of	of Disbu	urseme	ht Y	2 0 1 (	Perio
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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam											
	NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION	I FEDERAL PAC (AKA A	MBU	I-PAC)								
	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN				Date o	action ID of Disburs	ement					
	Mailing Address PO BOX 3197				0 <sup>M</sup> 6	M / D	) 1 /	2 0 1	0 <sup>Y</sup>			
	City LITTLE ROCK	State Zip Code AR 72203			Amou	nt of Each	Disburse	ement this				
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	State: AR District: 00 Runoff  Full Name (Last, First, Middle Initial)  GRASSLEY COMMITTEE INC				Date o	action ID of Disburs	ement					
	Mailing Address PO BOX 1000				0 6	M / D	7 /	žož	0 <sup>Y</sup>			
	City DES MOINES	State Zip Code IA 50304			Amou	nt of Each	Disburse	ment this	Period			
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	Office Sought:  House  X Senate  President  State: IA  District: 00	ement For: 2010 Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) LATOURETTE FOR CONGRESS COMMI	TTEE				action ID of Disburs		7420				
	Mailing Address 320 Kenarden Dr.				0 6	M / D	) 1	ž 0 1	0 <sup>Y</sup>			
	City Highland Hts.	State Zip Code OH 44143			Amou	nt of Each	Disburse	ment this	Period			
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	Candidate Name STEVE C LATOURETTE	Category/										
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President District:

None

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NAME OF COMMITTEE (In Full)  AMERICAN AMBULANCE ASSOCIATION	FEDERAL PAC (AKA AMBU-PA	C)
Full Name (Last, First, Middle Initial)  NATIONAL REPUBLICAN CONGRESSIO  Mailing Address 320 FIRST STREET SE	NAL COMMITTEE	Transaction ID: SB23.7427 Date of Disbursement  O 6
City WASHINGTON	State Zip Code DC 20003	Amount of Each Disbursement this Period
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Office Sought: House Disburse Senate President X State: District: None	ement For: 2009 Primary General Other (specify)	
Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIO	NAL COMMITTEE	Transaction ID: SB23.7428 Date of Disbursement
Mailing Address 320 FIRST STREET SE .		06 06 7 017 7 2010 4
City WASHINGTON	State Zip Code DC 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Replace Ck 1030 contribution	011	1000.00
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