FEC FORM 3X

Only

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 Medical Group Association PAC 3901 Hoyt Avenue ADDRESS (number and street) Check if different than previously Everett WA | 98290 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00408120 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: Χ Jul 20 (M7) Apr 20 (M4) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) 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) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2007 09 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mark E. Mantei Type or Print Name of Treasurer Electronically Filed by Mark E. Mantei 11 2 1 2007 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. 02/2003)

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Medical Group Association PAC [®] D " D 0 9 0 1 2007 0.9 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2007 11981.81 January 1 (b) Cash on Hand at 20511.58 Begining of Reporting Period 0.00 18299.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 20511.58 30280.81 6(a) and 6(c) for Column B) 4176.88 13946.11 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 16334.70 16334.70 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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. 02/2003) Page 3

Write or Type Committee Name
American Medical Group Association PAC

Report Covering the Period:

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From:

01

2007

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^D 3 0

^Y 2007

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
1. C	contributions (other than loans) From:						
(a	<i></i>						
	Than Political Committees	0.00	16049.00				
	(i) Itemized (use Schedule A)		100 10100				
	(ii) Unitemized	0.00	2250.00				
	(iii) TOTAL (add						
	Lines 11(a)(i) and (ii)	0.00	18299.00				
(b	o) Political Party Committees	0.00	0.00				
(0							
(0	(such as PACs)	0.00	0.00				
(0	d) Total Contributions (add Lines						
	11(a)(iii),(b) and (c)) (Carry	200	10000.00				
	Totals to Line 33, page 5)	0.00	18299.00				
2 T	ransfers From Affiliated/Other						
	arty Committees	0.00	0.00				
		2.22	0.00				
3. A	Il Loans Received	0.00	0.00				
		0.00	0.00				
	oan Repayments Received Ifsets To Operating Expenditures						
	Refunds, Rebates, etc.)						
	Carry Totals to Line 37, page 5)	0.00	0.00				
6. R	efunds of Contributions Made						
	Federal candidates and Other	0.00	0.00				
Р	olitical Committees	0.00	0.00				
	other Federal Receipts	0.00	2.22				
([Dividends, Interest, etc.)	0.00	0.00				
8. T	ransfers from Non-Federal and Levin Funds						
(a) Non-Federal Account	0.00	0.00				
	(from Schedule H3)	0.00	0.00				
/	h) Levin Funde (from Schodulo US)	0.00	0.00				
(b) Levin Funds (from Schedule H5)						
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00				
a T	otal Receipts (add Lines 11(d),						
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	0.00	18299.00				
'	2, 10, 17, 10, 17, and 10(0)/						
	otal Federal Receipts	0.00	10000 00				
(s	subtract Line 18(c) from Line 19)	0.00	18299.00				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS COLUMN A COLUMN B

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	0.00	0.00				
	(ii) Non-Federal Share	0.00	0.00				
	(b) Other Federal Operating Expenditures	0.00	889.60				
	(c) Total Operating Expenditures						
	(add 21(a)(i), (a)(ii) and (b))	0.00	889.60				
22.	Transfers to Affiliated/Other Party	0.00	0.00				
23.	Committees	0.00	0.00				
	Federal Candidates/Committeesand Other Political Committees	3500.00	11000.00				
24.	Independent Expenditure	0.00	0.00				
25	(use Schedule E)	0.00	0.00				
-0.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00				
	(use scriedule r)						
26.	Loan Repayments Made	0.00	0.00				
77	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				
	4. 5 6	0.00	0.00				
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00				
	(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	676.88	2056.51				
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	0.00	0.00				
	(ii) "Levin" Share	0.00	0.00				
	(b) Federal Election Activity Paid Entirely	0.00	0.00				
	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				
14	Total Dialous assesses (add Lines 04/a) 00						
) I.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4176.88	13946.11				
	20, 27, 20, 20, 21, 20(u), 28 dilu 30(c))	1170.00	100.10.11				
32.	Total Federal Disbursements						
	(ab.t.c.a.t.l.in.a. Od (a) (ii) france l.in.a. OO (a) (ii)						
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	4176.88	13946.11				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	18299.00		
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	18299.00		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	889.60		
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	889.60		

C	CHEDINE B /CEC Forms	· •								
	CHEDULE B (FEC Form 3	' Use sepe	rate schedule(s)	FOR LINE (check only	NUMBER:	PAGE 6/7				
IT	EMIZED DISBURSEMEN		ategory of the	21b	y one) ☐ 22	□ 24 □ 25 □ 26				
		Detailed S	Summary Page	27 27	$\frac{1}{28a}$ $\frac{23}{128b}$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
An	y Information copied from such Reports	and Statements may no	t be sold or used	by any person f	for the purpose of sol	icating contributions				
or 1	or commercial purposes, other than usir	ng the name and addres	s of any political	committee to so	licit contributions from	n such committee				
Λ	NAME OF COMMITTEE (In Full)									
17	American Medical Group Associa	tion PAC								
\mathbb{L}										
	Full Name (Last, First, Middle Initial)				Transaction ID: S	SB23.4548				
Α.	FRIENDS OF MAX BAUCUS				Date of Disbursen	nent				
	Mailing Address DOV 500				0 9 1 1	1 2007 1 2007				
	Mailing Address BOX 586					2007				
	City	State	Zip Code		Amount of Each [Disbursement this Period				
	HÉLENA	MT	59624							
	Purpose of Disbursement					2500.00				
	•									
	Candidate Name			Category/						
				Туре						
	Office Sought: House	Disbursement For:	2008							
	x Senate	X Primary	General							
	President	Other (spec	cify) 🔻							
	State: MT District: 00									
_	Full Name (Last, First, Middle Initial)				Transaction ID: S	SB23.4546				
В.	REPUBLICAN MAINSTREET PA	RTNERSHIP PAC			Date of Disbursen	ment				
	14 W A L L				0 9 1 4	^D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	Mailing Address c/o G&W 2201 Suite 320	Wisconsin Ave. NW	1		0 9	2007				
	City	State	Zip Code		Amount of Each F	Disbursement this Period				
	Washington	DC	20007		Amount of Lacif L	Disbursement this Feriou				
	Purpose of Disbursement		1			1000.00				
	Event									
	Candidate Name			Category/						
				Type						
	Office Sought: House	Disbursement For:	2008							
	Senate	X Primary	General							
	President	Other (spec	cify) 🔻							
	State: District:									

SUBTOTAL of Disbursements This Page (optional)	•	3500.00
TOTAL This Period (last page this line number only)	•	3500.00

90	CHEDULE B (FEC Form 3X)			<u>.</u>				_							
	•		rate schedule(s)		-OR L check		IUMBE	H:			L PA	GE	7/7		
Ш	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21k	ŕ	22 28a	П	23 28b	F	24 28c	$\frac{1}{x}$	25 29		26 30b	
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam													s	<u> </u>
\setminus	NAME OF COMMITTEE (In Full)														
	American Medical Group Association PAC	;													
_	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: S	B29.4	<u></u>			
Α.	Thomas Bruderlle						Date	of Di							
	Mailing Address 1422 Duke Street						0 ^M 9	М	/ D.	1 4	/ \	ž	0 ŏ 7	7 ^Y	
	City Alexandria	State VA	Zip Code 22314				Amou	int o	f Each	ı D	isburse	-			od
	Purpose of Disbursement Reimbursement						L.		-				377.	88	
	Candidate Name				egory/ ype										
	Senate President	ement For: Primary Other (spe	General cify) ▼												
	State: District:														
В.	Full Name (Last, First, Middle Initial) Thomas Bruderlle						Date	of Di	isburs	em					
	Mailing Address 1422 Duke Street						0 ^M 9	М	/ D.	1 5	5 / [ž	o ŏ 7	, ^Y	
	City Alexandria	State VA	Zip Code 22314				Amou	int o	f Each	ı D	isburse	-			od
	Purpose of Disbursement reimbursement								-	-			299.	00	
	Candidate Name				egory/ ype										
	Senate President	ement For: Primary Other (spe	General cify) ▼												
	State: District:														

SUBTOTAL of Disbursements This Page (optional)	•	676.88
TOTAL This Period (last page this line number only)	•	676.88