

**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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

ADDRESS (number and street) **8201 Greensboro Drive**
Suite 300
 Check if different than previously reported. (ACC) **McLean VA 22102**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00168070 3. IS THIS REPORT NEW (N) OR X AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:		Primary (12P)	General (12G)	Runoff (12R)
X October 15 Quarterly Report(Q3)			Convention (12C)	Special (12S)	
January 31 Quarterly Report(YE)		Election on			in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on			in the State of

5. Covering Period 07 01 2002 through 09 30 2002

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. Tristan North
 Signature of Treasurer Electronically Filed by Mr. Tristan North Date 10 21 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^h07 ^D01 ^v2002 To: ^h09 ^D30 ^v2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2002		29426.58
(b) Cash on Hand at Beginning of Reporting Period	32853.58	
(c) Total Receipts (from Line 19)	10305.00	25732.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	43158.58	55158.58
7. Total Disbursements (from Line 30)	7700.00	19700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	35458.58	35458.58
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**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From:

07 01 2002

To:

09 30 2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3650.00	
(ii) Unitemized	3400.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7050.00	17675.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	7050.00	18275.00
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.)	3255.00	7457.00
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)	10305.00	25732.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	10305.00	25732.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	7700.00	19700.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	7700.00	19700.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	7700.00	19700.00
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	7050.00	18275.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	7050.00	18275.00
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: (check only one)		PAGE 5 / 11	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

A. Full Name (Last, First, Middle Initial)
Alex Ashley

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2002

Mailing Address
308 Road 584

City State Zip Code
Gallup NM 87301

Amount of Each Receipt this Period
800.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MedStar Ambulance Service Owner/Operator

Donation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 800.00

Transaction ID: SA11A1.4151

B. Full Name (Last, First, Middle Initial)
Dale Berry

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2002

Mailing Address
2215 Hogback Road

City State Zip Code
Ann Arbor MI 48105

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Huron Valley Ambulance President

Donation

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

Transaction ID: SA11A1.4175

C. Full Name (Last, First, Middle Initial)
Mr. Ben Hinson

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2002

Mailing Address
2025 Vineville Avenue

City State Zip Code
Macon GA 31204

Amount of Each Receipt this Period
450.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Mid Georgia Ambulance President

Donation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 950.00

Transaction ID: SA11A1.4179

SUBTOTAL of Receipts This Page (optional) ▶ **1350.00**

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 6 / 11	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

A. Full Name (Last, First, Middle Initial)
Charles Kelley

Mailing Address
803 Hillcrest

City State Zip Code
Sparta IL 62286

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 2

Amount of Each Receipt this Period
800.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MedStar Ambulance President

Donation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 800.00

Transaction ID: SA11A1.4143

B. Full Name (Last, First, Middle Initial)
James McNeal, Jr.

Mailing Address
414 W. Elm

City State Zip Code
Burbank CA 91506

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 2

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Schaefer Ambulance Service CEO

Donation

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

Transaction ID: SA11A1.4153

C. Full Name (Last, First, Middle Initial)
Todd Porter

Mailing Address
704 6th Avenue, NE

City State Zip Code
Mandan ND 58554

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 2

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Metro-Area Ambulance Director

Donation

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

Transaction ID: SA11A1.4165

SUBTOTAL of Receipts This Page (optional) ▶ **1400.00**

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 7 / 11	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. Stanley Portman

Mailing Address
26C Carnation Circle

City State Zip Code
Reading MA 01867

Date of Receipt
 N M / D E / Y Y Y Y
07 30 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Action Ambulance President

Donation

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

Transaction ID: **SA11A1.4171**

Full Name (Last, First, Middle Initial)
B. Greg Shore

Mailing Address
417 Holly Ridge Drive

City State Zip Code
Anderson SC 28621

Date of Receipt
 N M / D E / Y Y Y Y
08 22 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MedShore Ambulance President

Donation

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

Transaction ID: **SA11A1.4186**

Full Name (Last, First, Middle Initial)
C. Edward Stofcheck, Jr.

Mailing Address
220 S. High Street

City State Zip Code
LaRue OH 43332

Date of Receipt
 N M / D E / Y Y Y Y
07 31 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Stofcheck Ambulance Service Owner

Donation

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

Transaction ID: **SA11A1.4204**

SUBTOTAL of Receipts This Page (optional)	▶	900.00
TOTAL This Period (last page this line number only)	▶	3650.00

**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 8 / 11
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. Cash from Conference

Mailing Address
8201 Greensboro Drive Suite 300
City State Zip Code
McLean VA 22102

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2002

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period 3255.00

Name of Employer Occupation Donations From Raffle

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 7457.00

Transaction ID: SA17.4221

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	3255.00
TOTAL This Period (last page this line number only)	▶	3255.00

**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)

PAGE 9 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. BECERRA FOR CONGRESS		Date of Disbursement 08 / 02 / 2002	
Mailing Address PO BOX 261060 City: LOS ANGELES State: CA Zip Code: 90026		Amount of Each Disbursement this Period 1200.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 31		Transaction ID: SB23.4107	

Full Name (Last, First, Middle Initial) B. Collins for Senator		Date of Disbursement 07 / 12 / 2002	
Mailing Address P.O. Box 1337 City: Portland State: ME Zip Code: 04104-1337		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: ME District:		Transaction ID: SB23.4103	

Full Name (Last, First, Middle Initial) C. FRIENDS OF BLANCHE LINCOLN		Date of Disbursement 09 / 23 / 2002	
Mailing Address PO BOX 3197 P.O. BOX 116 City: LITTLE ROCK State: AR Zip Code: 72203		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: AR District: 01		Transaction ID: SB23.4113	

SUBTOTAL of Disbursements This Page (optional) ▶	3200.00
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)

PAGE 10 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Friends of Houghton		Date of Disbursement 07 / 29 / 2002	
Mailing Address 33 East 3rd Street Suite 303 City State Zip Code Corning NY 14830		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: NY District: 29		Transaction ID: SB23.4105	

Full Name (Last, First, Middle Initial) B. Friends of Houghton		Date of Disbursement 09 / 05 / 2002	
Mailing Address 33 East 3rd Street Suite 303 City State Zip Code Corning NY 14830		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: NY District: 29		Transaction ID: SB23.4112	

Full Name (Last, First, Middle Initial) C. KAREN MCCARTHY FOR CONGRESS		Date of Disbursement 09 / 24 / 2002	
Mailing Address 1111 Valentine Road City State Zip Code Kansas City MO 64111		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: MO District: 05		Transaction ID: SB23.4115	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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)

PAGE 11 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
				<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Quinn for Congress		Date of Disbursement 08 / 28 / 2002
Mailing Address P.O. Box 2012 City: Elmsford State: NY Zip Code: 14219		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4108
State: NY	District: 27	

B.

C.

SUBTOTAL of Disbursements This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	7700.00