

**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

Michigan Doctors Political Action Committee - Michigan State Medical Society

ADDRESS (number and street)

P.O. Box 769

Check if different than previously reported. (ACC)

East Lansing

MI

48828

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00001180

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)
- 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 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01

01

2004

through

03

31

2004

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

Type or Print Name of Treasurer

Dr. James Grant, MD

Signature of Treasurer

Electronically Filed by Dr. James Grant, MD

Date

04

15

2004

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**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Michigan Doctors Political Action Committee - Michigan State Medical Society

Report Covering the Period: From: <sup>M</sup>01 <sup>D</sup>01 <sup>Y</sup>2004 To: <sup>M</sup>03 <sup>D</sup>31 <sup>Y</sup>2004

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2004 <sup>Y</sup>		232190.30
(b) Cash on Hand at Beginning of Reporting Period .....	232190.30	
(c) Total Receipts (from Line 19) .....	13550.00	13550.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	245740.30	245740.30
<hr/>		
7. Total Disbursements (from Line 31) .....	15825.00	15825.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	229915.30	229915.30
<hr/>		
9. Debts and Obligations owed <b>TO</b> the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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 (Rev. 02/2003)

Page 3

Write or Type Committee Name

Michigan Doctors Political Action Committee - Michigan State Medical Society

Report Covering the Period: From: <sup>M</sup>01 <sup>-</sup>01 <sup>-</sup>2004 To: <sup>N</sup>03 <sup>-</sup>31 <sup>-</sup>2004

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) .....	5400.00	
(ii) Unitemized .....	8150.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	13550.00	13550.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	13550.00	13550.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	13550.00	13550.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13550.00	13550.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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.....	10950.00	10950.00
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.....	4875.00	4875.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15825.00	15825.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	15825.00	15825.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	13550.00	13550.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13550.00	13550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	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)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. John Bizon</b>		Date of Receipt M / D / Y Y Y Y 03 / 22 / 2004
Mailing Address 3800 Capital Ave SW #204		Transaction ID: SA11A1.9070
City <b>Battle Creek</b>	State <b>MI</b>	Zip Code <b>49015</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>450.00</b>
Name of Employer <b>SELF</b>	Occupation <b>PHYSICIAN</b>	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>450.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Edward C Bush, MD</b>		Date of Receipt M / D / Y Y Y Y 02 / 17 / 2004
Mailing Address 14241 Pennsylvania Ave		Transaction ID: SA11A1.8018
City <b>Riverview</b>	State <b>MI</b>	Zip Code <b>48192-7510</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>SELF</b>	Occupation <b>PHYSICIAN</b>	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Peter Duhamel, MD</b>		Date of Receipt M / D / Y Y Y Y 03 / 22 / 2004
Mailing Address 1055 Stella Lane		Transaction ID: SA11A1.8074
City <b>Rochester Hills</b>	State <b>MI</b>	Zip Code <b>48309</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>225.00</b>
Name of Employer <b>SELF</b>	Occupation <b>PHYSICIAN</b>	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>225.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>975.00</b>
<b>TOTAL</b> 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 7 / 20

(check only one)

11a  11b  11c  12  
13 14 15 16 17

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. PAUL FARR</b>		Date of Receipt M / D / Y 03 / 22 / 2004
Mailing Address 1715 Darby Lane SE		Transaction ID: SA11A1.9078
City Grand Rapids	State MI	Zip Code 49506
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Thomas A., MD, Gignac</b>		Date of Receipt M / D / Y 03 / 25 / 2004
Mailing Address 133 S Main St Ste D		Transaction ID: SA11A1.9092
City Mt Clemens	State MI	Zip Code 48043-2386
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Scot GOLDBERG</b>		Date of Receipt M / D / Y 03 / 31 / 2004
Mailing Address 11900 E Twelve Mile Rd		Transaction ID: SA11A1.B102
City Warren	State MI	Zip Code 48093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> 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 8 / 20

(check only one)

<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)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. Dr. James Grant MD</b>		Date of Receipt M / D / Y 02 / 18 / 2004
Mailing Address 1574 Sodon Lake Drive		Transaction ID: SA11A1.9033
City Bloomfield Hills	State MI	Zip Code 48302
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer South Oakland Anesthesia Association	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. DOROTHY KAHKONEN</b>		Date of Receipt M / D / Y 01 / 30 / 2004
Mailing Address 2815 Circle Drive		Transaction ID: SA11A1.8000
City Flint	State MI	Zip Code 48507
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Roger N. Kahn</b>		Date of Receipt M / D / Y 03 / 02 / 2004
Mailing Address 3424 Davenport Avenue		Transaction ID: SA11A1.8057
City Saginaw	State MI	Zip Code 48602
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> 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 / 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. James Kihrey</b>		Date of Receipt M / D / Y 02 / 17 / 2004
Mailing Address 1000 Oakland Drive		Transaction ID: SA11A1.9020
City Kalamazoo	State MI	Zip Code 49008
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. David Mik</b>		Date of Receipt M / D / Y 02 / 17 / 2004
Mailing Address Healthcare Midwest		Transaction ID: SA11A1.9022
City Kalamazoo	State MI	Zip Code 49007
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 225.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Alan Mindin</b>		Date of Receipt M / D / Y 02 / 17 / 2004
Mailing Address 1701 Baldwin Rd #208		Transaction ID: SA11A1.9024
City Pontiac	State MI	Zip Code 48340
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>825.00</b>
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 / 20

(check only one)

<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)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. Appa Rao Mukkamala</b>		Date of Receipt M / D / Y Y Y Y 03 / 22 / 2004
Mailing Address One Hurley Plaza		Transaction ID: SA11A1.9078
City Flint	State MI	Zip Code 48503-5802
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. KENNETH MUSSON</b>		Date of Receipt M / D / Y Y Y Y 03 / 22 / 2004
Mailing Address 230 Temple Street		Transaction ID: SA11A1.9080
City Mason	State MI	Zip Code 48854
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL SANDLER</b>		Date of Receipt M / D / Y Y Y Y 02 / 18 / 2004
Mailing Address 427D Barcroft Way		Transaction ID: SA11A1.9089
City West Bloomfield	State MI	Zip Code 48323
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> 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 11 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. NARINDER SHERMA</b>		Date of Receipt M / D / Y 02 / 17 / 2004
Mailing Address 14151 Greenfield		Transaction ID: SA11A1.9025
City	State	Zip Code
Detroit	MI	48227
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼	300.00

Full Name (Last, First, Middle Initial) <b>B. Paul SWEDA</b>		Date of Receipt M / D / Y 03 / 25 / 2004
Mailing Address 16570 Nineteen Mile Rd		Transaction ID: SA11A1.9100
City	State	Zip Code
Clinton Township	MI	48028
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼	300.00

Full Name (Last, First, Middle Initial) <b>C. Joseph WILHELM</b>		Date of Receipt M / D / Y 01 / 19 / 2004
Mailing Address 702 W Lake Lansing Road		Transaction ID: SA11A1.B996
City	State	Zip Code
East Lansing	MI	48823-1448
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Aggregate Year-to-Date ▼	300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>5400.00</b>

**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 12 / 20

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial)

**A.** AMPAC

Mailing Address 1101 VERMONT AVENUE NW  
12TH FLOOR

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

008  
Category/  
Type

Transaction ID: SB23.5926

Date of Disbursement

01 / 30 / 2004

Amount of Each Disbursement this Period

8500.00

Full Name (Last, First, Middle Initial)

**B.** AMPAC

Mailing Address 1101 VERMONT AVENUE NW  
12TH FLOOR

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President  
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

008  
Category/  
Type

Transaction ID: SB23.5926

Date of Disbursement

03 / 31 / 2004

Amount of Each Disbursement this Period

2450.00

SUBTOTAL of Disbursements This Page (optional) ▶

10950.00

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

10950.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

**A.** Full Name (Last, First, Middle Initial)  
Barb Vanderveen for State Rep.

Mailing Address 6185 ALGER

City Allendale State MI Zip Code 49401

Purpose of Disbursement

Candidate Name Barb Vanderveen for State Rep.

Office Sought:  House  Senate  President  
State: MI District: B9

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8940  
Date of Disbursement  
02 / 11 / 2004

Amount of Each Disbursement this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Bernero for State Senate

Mailing Address 6017 Laporte Dr.

City Lansing State MI Zip Code 48911

Purpose of Disbursement

Candidate Name Bernero for State Senate

Office Sought:  House  Senate  President  
State: MI District: 23

Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8930  
Date of Disbursement  
01 / 30 / 2004

Amount of Each Disbursement this Period  
175.00

**C.** Full Name (Last, First, Middle Initial)  
Bill Huizenga for State Rep

Mailing Address PO Box 254

City Zeeland State MI Zip Code 49464

Purpose of Disbursement

Candidate Name Bill Huizenga for State Rep

Office Sought:  House  Senate  President  
State: District

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8943  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
300.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ **625.00**

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

**A.** Full Name (Last, First, Middle Initial)  
Burton Leland Leadership Fund

Mailing Address 427 WESTMORELAND AVE

City Lansing State MI Zip Code 48915

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8949  
Date of Disbursement  
03 / 11 / 2004

Amount of Each Disbursement this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Citizens for Dianne Byrum

Mailing Address 4933 Belleview Rd.

City Onondaga State MI Zip Code 49264

Purpose of Disbursement

Candidate Name  
Citizens for Dianne Byrum

Office Sought:  House Senate President  
State: MI District 67

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8941  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Citizens for Shirley Johnson

Mailing Address 4222 Sheridan Dr.

City Royal Oak State MI Zip Code 48073

Purpose of Disbursement

Candidate Name  
Citizens for Shirley Johnson

Office Sought: House Senate President  
State: MI District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8937  
Date of Disbursement  
02 / 11 / 2004

Amount of Each Disbursement this Period  
200.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ **550.00**

**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

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(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial)  
A. Citizens to Elect Bruce Patterson Sen.

Mailing Address 42479 REDFERN DR

City Canton State MI Zip Code 48187

Purpose of Disbursement

Candidate Name  
Citizens to Elect Bruce Patterson Sen.

Office Sought: House Disbursement For: 2006  
 Senate X Primary General  
 President Other (specify) ▼

State: MI District 7

Transaction ID: SB29.8955  
Date of Disbursement  
03 / 31 / 2004

Amount of Each Disbursement this Period  
250.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
B. Citizens to Elect Edward J. Gaffney

Mailing Address 283 Kenwood Court

City GrossePointe Farms State MI Zip Code 48236

Purpose of Disbursement

Candidate Name  
Citizens to Elect Edward J. Gaffney

Office Sought: House Disbursement For: 2004  
 Senate X Primary General  
 President Other (specify) ▼

State: District

Transaction ID: SB29.8942  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
150.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
C. Cit Supporting Mike Nofs

Mailing Address PO BOX 219

City Battle Creek State MI Zip Code 49016

Purpose of Disbursement

Candidate Name  
Cit Supporting Mike Nofs

Office Sought:  House Disbursement For: 2004  
 Senate X Primary General  
 President Other (specify) ▼

State: MI District 62

Transaction ID: SB29.8953  
Date of Disbursement  
03 / 11 / 2004

Amount of Each Disbursement this Period  
200.00

011  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) ▶ 600.00

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

**A.** Full Name (Last, First, Middle Initial)  
Committee to Elect Buzz Thomas

Mailing Address P.O. Box 14854

City Detroit State MI Zip Code 48214

Purpose of Disbursement

Candidate Name  
Committee to Elect Buzz Thomas

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8954  
Date of Disbursement  
03 / 11 / 2004

Amount of Each Disbursement this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Committee to Elect Gary Newell

Mailing Address PO box 524

City Saranac State MI Zip Code 48881

Purpose of Disbursement

Candidate Name  
Committee to Elect Gary Newell

Office Sought:  House Senate President  
State: MI District B7

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8938  
Date of Disbursement  
02 / 11 / 2004

Amount of Each Disbursement this Period  
175.00

**C.** Full Name (Last, First, Middle Initial)  
CTE Fulton Sheen

Mailing Address 352 12TH ST STE 5

City Plainwell State MI Zip Code 49080

Purpose of Disbursement

Candidate Name  
CTE Fulton Sheen

Office Sought: House Senate President  
State: District

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8944  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
150.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ **475.00**

**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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial)  
**A. Dave Robertson for Rep**

Mailing Address PO Box 181

City Grand Blanc State MI Zip Code 48439

Purpose of Disbursement

Candidate Name  
Dave Robertson for Rep

Office Sought:  House  Senate  President  
State: MI District: 51

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8956  
Date of Disbursement  
03 / 31 / 2004

Amount of Each Disbursement this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. DeRossett Torch Leadership Fund**

Mailing Address 11207 PLEASANT LAKE RD

City MANCHESTER State MI Zip Code 48158

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8931  
Date of Disbursement  
01 / 30 / 2004

Amount of Each Disbursement this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. Gilda Jacobs for Senate**

Mailing Address B353 Hendrie

City Huntington Woods State MI Zip Code 48070

Purpose of Disbursement

Candidate Name  
Gilda Jacobs for Senate

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB29.8947  
Date of Disbursement  
03 / 11 / 2004

Amount of Each Disbursement this Period  
300.00

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

**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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial)  
**A. Ken Sikkema for Senate**

Mailing Address P.O. Box 344

City Grandville State MI Zip Code 49468

Purpose of Disbursement

Candidate Name  
Ken Sikkema for Senate

Office Sought: House Senate President  
Disbursement For: 2006  
 Primary General Other (specify) ▼

State: District

Transaction ID: SB29.8939  
Date of Disbursement  
02 / 11 / 2004

Amount of Each Disbursement this Period  
150.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. Michelle McManus for State Senate**

Mailing Address 7883 E ALPERS RD

City LAKE LEELANAU State MI Zip Code 49653

Purpose of Disbursement

Candidate Name  
Michelle McManus for State Senate

Office Sought: House Senate President  
 Senate  
Disbursement For: 2004  
 Primary General Other (specify) ▼

State: MI District 35

Transaction ID: SB29.8951  
Date of Disbursement  
03 / 11 / 2004

Amount of Each Disbursement this Period  
200.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. Pharmacy PAC**

Mailing Address B15 N WASHINGTON AVE

City Lansing State MI Zip Code 48906

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President  
Disbursement For: Primary General  
Other (specify) ▼

State: District

Transaction ID: SB29.8957  
Date of Disbursement  
03 / 31 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

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

**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

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(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial) <b>A. Stephen Adamini C. C.</b>		Transaction ID: SB29.8946 Date of Disbursement 03 / 11 / 2004	
Mailing Address 27 Oak Hill Dr.		Amount of Each Disbursement this Period 150.00	
City Marquette State MI Zip Code 49855	Purpose of Disbursement	011 Category/ Type	
Candidate Name Stephen Adamini C. C.			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI      District: 99	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Terri Lynn Land for SOS</b>		Transaction ID: SB29.8946 Date of Disbursement 03 / 11 / 2004	
Mailing Address 1701 Porter SW STE 4		Amount of Each Disbursement this Period 100.00	
City Wyoming State MI Zip Code 49508	Purpose of Disbursement	011 Category/ Type	
Candidate Name Terri Lynn Land for SOS			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Tom George for State Senate</b>		Transaction ID: SB29.8936 Date of Disbursement 02 / 11 / 2004	
Mailing Address P.O. Box 1285		Amount of Each Disbursement this Period 400.00	
City Portage State MI Zip Code 49061	Purpose of Disbursement	011 Category/ Type	
Candidate Name Tom George for State Senate			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI      District: 19	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>650.00</b>
<b>TOTAL</b> 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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Michigan Doctors Political Action Committee - Michigan State Medical Society

Full Name (Last, First, Middle Initial)  
A. Tony Stamas for State Senate

Mailing Address 5915 Eastman Ave. #100

City Midland State MI Zip Code 48840

Purpose of Disbursement

Candidate Name  
Tony Stamas for State Senate

Office Sought: House Disbursement For: 2004  
 Senate  Primary General  
 President  
 State: MI District: 36 Other (specify) ▼

Transaction ID: SB29.5945  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
225.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
B. Valde Garcia for State Senate

Mailing Address P.O. Box 136

City St. Johns State MI Zip Code 48870

Purpose of Disbursement

Candidate Name

Office Sought:  House Disbursement For:  
 Senate Primary General  
 President  
 State: MI District: 22 Other (specify) ▼

Transaction ID: SB29.5934  
Date of Disbursement  
01 / 30 / 2004

Amount of Each Disbursement this Period  
150.00

011  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) .....	▶	375.00
TOTAL This Period (last page this line number only) .....	▶	4875.00