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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 North Carolina Medical Society Federal Political Education and Action Committee PO Box 25834 ADDRESS (number and street) 222 N. Person Street Check if different than previously Raleigh NC 27611 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00003152 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) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 Χ 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 04 0 1 2006 06 30 2006 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. , Asst Treasurer Stephen W. Keene Type or Print Name of Treasurer Electronically Filed by , Asst Treasurer Stephen W. Keene 07 14 2006 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) Only

SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS

Page 2

Report Covering the Period: From:	01 2006	To: 0 6 3 0 Y Y Y
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1 Y2006 Y2006		133822.96
(b) Cash on Hand at Begining of Reporting Period	147641.48	
(c) Total Receipts (from Line 19)	7724.94	28011.46
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	155366.42	161834.42
Total Disbursements (from Line 31)	3700.00	10168.00
Cash on Hand at Close of		
Reporting Period (subtract Line 7 from Line 6(d))	151666.42	151666.42
Debts and Obligations owed TO		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations owed BY		
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)	

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

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

North Carolina Medical Society Federal Political Education and Action Committee

0 1 м м 0 4 м м 0 6 2006 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1250.00 10615.00 (i) Itemized (use Schedule A) 6270.00 17022.00 (ii) Unitemized (iii) TOTAL (add 7520.00 27637.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 7520.00 27637.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 204.94 374.46 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 7724.94 28011.46 12, 13, 14, 15, 16, 17, and 18(c))

7724.94

28011.46

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	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	5.55
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	168.00
	Expenditures(c) Total Operating Expenditures	0.00	100.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	168.00
2.	Transfers to Affiliated/Other Party Committees	3200.00	9500.00
3.	Contributions to Federal Candidates/Committees		
	and Other Political Committees	0.00	0.00
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	(use Schedule F)		
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	500.00	500.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	V	0.00	0.00
	(ii) "Levin" Share(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
1.	Total Disbursements (add Lines 21(c), 22,	2700.00	10160.00
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3700.00	10168.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	2700.00	10100.00
	from Line 31)	3700.00	10168.00

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)	7520.00	27637.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7520.00	27637.00
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	168.00
7. 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	168.00

S

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 11 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17							
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any pers Iress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.							
\sum	NAME OF COMMITTEE (In Full) North Carolina Medical Society Federal I	Political Ed	ducation and Action Commi	ttee							
A.	Full Name (Last, First, Middle Initial) Dr. William Osgood Bell			Date of Receipt							
	Mailing Address 2810 Maplewood Avenue	9		0 4 2 0 2 0 0 6							
	City Winston Salem	State NC	Zip Code 27103-4138	Transaction ID: SA11A1.10597 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		250.00							
	Name of Employer Neurosurgical Associates of the Caroli	Occupation Physician	1								
	Receipt For: 2006 X Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00								
В.	Full Name (Last, First, Middle Initial) Dr. Hazem El-Droubi			Date of Receipt							
٠.	Mailing Address 111 Mallard Lane			0 4 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City Rockingham	State NC	Zip Code 28379-5203	Transaction ID: SA11A1.10561							
	FEC ID number of contributing federal political committee.	C	20379-0203	Amount of Each Receipt this Period 250.00							
	Name of Employer Richmond Urology Clinic	Occupation Physician									
	Receipt For: 2006 X Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00								
C .	Full Name (Last, First, Middle Initial) Dr. Howard Mandell			Date of Receipt							
	Mailing Address 10620 Park Road Ste 230			0 4 1 0 2 0 0 6							
	City	State	Zip Code	Transaction ID: SA11A1.10572							
	Charlotte	NC	28210-8472	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		250.00							
	Name of Employer Metrolina Neurological As-	Occupation Physician									
	sociates, PA Receipt For: 2006		Year-to-Date ▼								
	X Primary General Other (specify) ▼	-	250.00								
	IJRTOTAL of Receipts This Page (ontinnal)			750.00							

TOTAL This Period (last page this line number only)

Primary

Other (specify)

X General

SCHEDULE A (FEC Form 3X)

PAGE 7/11 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) North Carolina Medical Society Federal Political Education and Action Committee Full Name (Last, First, Middle Initial) Dr. Leonard J. Newton Date of Receipt Mailing Address PO Box 549 26 06 2006 City State Zip Code Transaction ID: SA11A1.10697 Pinehurst NC 28370 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Mid-Carolina Physician Or-Occupation Physician ganization 2006 Aggregate Year-to-Date ▼ Receipt For: X General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Nancy Elizabeth Whatley Date of Receipt Mailing Address 76 Peachtree Road 0 5 05 2006 Ste 300 City Transaction ID: SA11A1.10668 State Zip Code <u>Asheville</u> NC 28803-3131 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Asheville Anesthesia Asso-ciates, PA Occupation Physician 2006 Receipt For: Aggregate Year-to-Date ▼

250.00

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	<u> </u>	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 8 / 11 (check only one)							
			Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17							
Ar or	ly information copied from such Reports and States for commercial purposes, other than using the nan	ments may	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.							
$\overline{}$	NAME OF COMMITTEE (In Full)										
\rangle	North Carolina Medical Society Federal Pe	olitical Ed	ducation and Action Commit	tee							
۹.	Full Name (Last, First, Middle Initial) Wachovia Bank			Date of Receipt							
	Mailing Address PO Box 563966			04 28 2006							
	City	State	Zip Code	Transaction ID: SA17.10638							
	Raleigh	NC	28262	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		62.31							
	Name of Employer	Occupation	1	Interest earned in April							
		Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		231.83								
3.	Full Name (Last, First, Middle Initial) Wachovia Bank			Date of Receipt							
	Mailing Address PO Box 563966			05 31 2006							
	City	State	Zip Code	Transaction ID: SA17.10671							
	Raleigh	NC	28262	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		74.39							
	Name of Employer	Occupation	1	Interest earned in May							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		306.22								
	Full Name (Last, First, Middle Initial) Wachovia Bank			Date of Receipt							
	Mailing Address PO Box 563966			0 6 3 0 7 2 0 0 6							
	City	State	Zip Code	Transaction ID: SA17.10702							
	Raleigh	NC	28262	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		68.24							
	Name of Employer	Occupation	1	Interest earned in June							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		374.46								
s	UBTOTAL of Receipts This Page (optional)			204.94							
			·	204.94							
Т	OTAL This Period (last page this line number only	')		20							

SCHEDULE B (FEC Form 3X)

SCILDULL B (I LOI OIIII 3A)	Use seperate schedule(s)		(check only		: NUMBER: PAGE 9/11 lv one)						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	X 22 28a	F	23 28b	24 28c	П	25 29	26	
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North Carolina Medical Society Federal Pol	itical Education and Action	n Coı	nmitt	ee							
Full Name (Last, First, Middle Initial)							SB22.1	0587	7		
American Medical Political Action Committee	ee			Date	of D	isburse		y y	Υ.	Y	
Mailing Address 1101 Vermont Avenue, N	W			0 4	1	1	5 /	2	0 Ď 6		
	State Zip Code 20005			Amo	ount c	f Each	Disburs	ement	this P	eriod	
Purpose of Disbursement	20003		_	$+$ Γ					900.0	0	
Contributions 4/1/06-4/15/06											
Candidate Name		Categ Typ	-								
Office Sought: House Disburser Senate	nent For: Primary General										
President	Other (specify)										
State: District:											
Full Name (Last, First, Middle Initial)							SB22.1	0637	7		
American Medical Political Action Committee	ee				of D	isburse		V * V		V	
Mailing Address 1101 Vermont Avenue, N	W			0 5	5 ^M	0	5 /	ž	0 Ď 6	Y	
•	State Zip Code DC 20005			Amo	ount c	f Each	Disburs				
Purpose of Disbursement Contributions 4/16/06-4/30/06						-			900.0	0	
Candidate Name		Categ Typ	-								
Office Sought: House Disburser Senate	Primary General										
State: President State:	Other (specify)										
Full Name (Last, First, Middle Initial) American Medical Political Action Committee	90			-		ion ID: isburse	SB22.1 ement	10669	9		
Mailing Address 1101 Vermont Avenue, N	W			0 ^M 5	5 M	[′] 3	0 /	Ý Ž	0 Ď 6	Y	
•	State Zip Code DC 20005			Amo	ount c	f Each	Disburs	ement	this P	eriod	_
Purpose of Disbursement Contributions 5/1/06-5/15/06									650.0	0	
Candidate Name		Categ Typ									
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)										
orace. District.											_
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	Ļ				24	450.0	0	
TOTAL This Period (last page this line number only)			•								

S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER:	PAGE 10 / 11
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Ш	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b X 22	23 24 25 26
		, ,	27 28a	28b 28c 29 30b
	y Information copied from such Reports and State			
or	for commercial purposes, other than using the nar	ne and address of any politic	al committee to solicit contribi	utions from such committee
\setminus	NAME OF COMMITTEE (In Full)			
/	North Carolina Medical Society Federal F	olitical Education and A	tion Committee	
<u></u>	Full Name (Last, First, Middle Initial)			
A.	American Medical Political Action Comm	ittoo		ction ID: SB22.10683 Disbursement
	American Medical Folitical Action Comm	illee	Date of	
	Mailing Address 1101 Vermont Avenue,	NW	0.6	08 / 2006
	City	State Zip Code	Amount	of Each Disbursement this Period
	Washington	DC 20005		
	Purpose of Disbursement			350.00
	contributions 5/16/06-5/31/06			
	Candidate Name		Category/ Type	
		sement For:		
	Senate	Primary General		
	President State: District:	Other (specify)		
В.	Full Name (Last, First, Middle Initial) American Medical Political Action Comm	ittoo		etion ID: SB22.10701
	American Medical Folitical Action Comm	illee	Date of	Disbursement
	Mailing Address 1101 Vermont Avenue,	NW	0 6	30 2006
	City	State Zip Code	Amount	of Each Disbursement this Period
	Washington	DC 20005		
	Purpose of Disbursement			400.00
	Contributions 6/1/06-6/30/06			
	Candidate Name		Category/	
	Office Sought: House Disburs	sement For:	Туре	
	Office Sought: House Disburs Senate	Primary General		
	President	Other (specify)		
	State: District:			

		750.00
SUBTOTAL of Disbursements This Page (optional)	>	750.00
TOTAL This Period (last page this line number only)	•	3200.00

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S	I Lica canarata canadula(c)								E NUMBER: PAGE 11/11									
ITEMIZED DISBURSEMENTS		S for e	for each category of the Detailed Summary Page				neck on 21b	ly c	ne) 22		23		24		25		26	
							27		28a		28b		28c	Х	29		30b	
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$\overline{\ }$	NAME OF COMMITTEE (In Full)																	
\backslash	North Carolina Medical Society Fed	deral Political	Edu	cation and Ac	tion C	Cor	mmitte	ее										
	Full Name (Last, First, Middle Initial)								Trans	act	ion ID:	SE	329.10	630				
۹.	Neal, for NC Senate Hunt								Date o	of D	isburse	eme	ent					
	Mailing Address 2608 Sherborne F	Place							0 ^M 4	М	2	6	/ Y	ž	οŏε	S Y		
	City Raleigh	State NC		Zip Code 27612					Amou	nt o	f Each	Dis	bursen	nent	this F	Perio	od .	
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	Senate President	Disbursement F Prima Other	ary	General ecify) ▼														
	State: District: I							1										

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