REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

JUL 12 9 30 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
The Political Action Committee of the American Society of Plastic & Reconstructive Surgeons, Inc. "Plastypac"

ADDRESS (number and street) ☐ Check if different than previously reported
444 E. Algonquin Road

CITY, STATE and ZIP CODE
Arlington Heights, Illinois 60005

2. FEC IDENTIFICATION NUMBER
C00249342

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4/1/96 through 6/30/96		
6. (a) Cash on Hand January 1, 19 96		$ 127,351.84
(b) Cash on Hand at Beginning of Reporting Period	$ 126,967.45	
(c) Total Receipts (from Line 19)	$ 822.84	$ 13,878.45
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 127,730.29	$ 141,230.29
7. Total Disbursements (from Line 30)	$ 14,500.00	$ 28,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 113,230.29	$ 113,230.29
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Dave Fellers, CAE, Assistant Treasurer

Signature of Treasurer

Date 7/12/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FE6ANose

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE The Political Action Committee of the American Society of Plastic & Reconstructive Surgeons Inc. "Plastypac"

REPORT COVERING PERIOD FROM 4/1/96 TO: 6/30/96

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	200.00	4,700.00
ii. Unitemized	120.00	8,160.00
iii. Total (add i and ii) ➤	320.00	12,860.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	320.00	12,860.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	502.84	1,018.45
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	822.84	13,878.45
20. Total Federal Receipts (subtract line 18 from line 19) ➤	822.84	13,878.45
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (Add a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	14,500.00	28,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	14,500.00	28,000.00
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	14,500.00	28,000.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	320.00	12,860.00
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)		
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤		

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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)
The Political Action Committee of the American Society of Plastic & Reconstructive Surgeons, Inc. "Plastypac"

A. Full Name, Mailing Address and ZIP Code Malcolm Z. Roth, M.D. One Brookdale Plaza Brooklyn, NY 11212	Name of Employer Self	Date (month, day, year) 5/2/96	Amount of Each Receipt this Period 200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Physician		
	Aggregate Year-to-Date > $ 200.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	200.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)
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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Bilirakis for Congress P.O. Box 1077 Tarpon Springs, FL 34688	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	4/29/96	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Mica for Congress P.O. Box 181456 Casselberry, FL 32718	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Pat Sullivan for Congress 2411 16th Avenue Greeley, CO 80631	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	6/30/96	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Bob Livingston 5163 General DeGaulle Drive, Suite 210 New Orleans, LA 70131	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Upton for All of Us P.O. Box 490 St. Joseph, MI 49085	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Max Cleland P.O. Box 7843 Atlanta, GA 30357	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
People for Ganske 521 East Locust, 2nd Floor Des Moines, IA 50309	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	4,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Pomeroy for Congress P.O. Box 746 Bismark, ND 58502-0746	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Sherrod Brown 111 Edgefield Drive Elyria, OH 44035	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00

SUBTOTAL of Disbursements This Page (optional) 9,500.00

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

4-00173

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER

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Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Coburn for Congress P.O. Box 504 Muskogee, OK 74402	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
Dreier for Congress P.O. Box 1110 Covina, CA 91722	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
Ensign for Congress 4012 South Rainbow Boulevard, Suite K Las Vegas, NV 89103 -611	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
Friends for Gerald Kleczka 3268 Sou-h 9th Street Milwaukee, WI 53215	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
Weld for Senate 90 Canal Street Boston, MA 02114	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	1,000.00
Pallone for Congress P.O. Box 3176 Long Branch, NJ 07740	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
Charlie Norwood for Congress Committee P.O. Box 499 Evans, GA 30809	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	500.00
The Helms for Senate Committee P.O. Box 20699 Raleigh, NC 27619	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/96	1,000.00
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	14,500.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	DATE OF RECEIPT 7/12/96
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

J.A.Q.
PREPARER

7/12/96
DATE PREPARED

FEC FORM 70-2 (12/92)