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Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (In full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines. — 12PE4M5

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

ADDRESS (number and street) ▼ 7610 CARROLL AVENUE SUITE 310

☐ Check if different than previously reported. (ADD)

CITY ▲ TAKOMA PARK STATE ▲ MD ZIP CODE ▲ 20912

2. FEC IDENTIFICATION NUMBER ▼ C00238204

3. IS THIS REPORT ☒ 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 Year-End 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 07 01 2001 through 12 31 2001

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 PARVEZ SHAH

Signature of Treasurer (X) [signature] Date (M) ___

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 (Revised 1/01)

FE1AN042.PDF

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

Report Covering the Period: From: 07 01 2001 To: 12 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		7,396.85
(b) Cash on Hand at Beginning of Reporting Period	6937.98	
(c) Total Receipts (from Line 19)	16,204.68	18,112.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	23,142.66	25,509.02
7. Total Disbursements (from Line 30)	15,467.47	17,833.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7,675.19	7,675.19
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)		

X 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 1/01)

Write or Type Committee Name
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

Report Covering the Period: From: 07 01 2001 To: 12 31 2001

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)	9200.00	
(ii) Unitemized	7000.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	16,200.00	18,100.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	16200.00	18100.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	4.68	12.17
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	16204.68	18,112.17
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	16204.68	18,112.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	15467.47	178333
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	15467.47	178333
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
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 Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	15467.47	178333
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	15467.47	178333

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	16200.00	18100.00
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	16200.00	18100.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	15467.47	178333
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	15467.47	178333

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 1 OF 5

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): CHAUDHRY, AKRAM
Mailing Address: 874 A 2 POMPTON AVE
City: CEDAR GROVE State: NJ Zip Code: 07009
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: BUSINESS
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 / 05 / 2001
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): TOOR, ARIF A
Mailing Address: 275 WEST HYERDALE DR.
City: GOSHEN State: CT Zip Code: 06756
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date: 1500.00
Date of Receipt: 07 / 05 / 2001
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): MUSLIM, ARIF
Mailing Address: 578 RIVER ROAD
City: NEWBURGH State: NY Zip Code: 12550
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date: 1100.00
Date of Receipt: 07 / 05 / 2001
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 2 OF 5

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): MALIK, M ASLAM
Mailing Address: 8145 EAGLE MOUNTAIN CIR
City: FORT WORTH State: TX Zip Code: 76135
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 / 27 / 2001
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): JAVED, MADIHA
Mailing Address: 7 EAST DR.
City: EDISON State: NJ Zip Code: 08820
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 / 05 / 2001
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): ASHRAF, NASIM
Mailing Address: 15804 PHILLIPS OAK DRIVE
City: SPENCERVILLE State: MD Zip Code: 20868
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 / 05 / 2001
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 3 OF 5

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): CHAUDHRY, NISAR
Mailing Address: 5325 NIGHT SHADE CT
City: COLUMBIA State: MD Zip Code: 21045
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100,000
Date of Receipt: 11 / 21 / 2001
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): ATIQ OMAR
Mailing Address: 7200 S HAZEL
City: PINE BLUFF State: AR Zip Code: 71603
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 900.00
Date of Receipt: 07 / 27 / 2001
Amount of Each Receipt this Period: 900.00

C.
Full Name (Last, First, Middle Initial): MASSEY, PERVAIZ
Mailing Address: 6961 SAINT ANDREWS CIR
City: FAYETTEVILLE State: NY Zip Code: 13066
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 400.00
Date of Receipt: 07 / 27 / 2001
Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ▶ 2300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 4 OF 5

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): AKBAR, RANA
Mailing Address: 4701 TOWNE CENTRE, # 304
City: SAGINAW State: MI Zip Code: 48604
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date: 1,000.00
Date of Receipt: 07 05 2001
Amount of Each Receipt this Period: 1,000.00

B.
Full Name (Last, First, Middle Initial): SHIRAZI, SYED
Mailing Address: 1637 DUNWOODY SQ.
City: DUNWOODY State: GA Zip Code: 30338
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date: 600.00
Date of Receipt: 07 27 2001
Amount of Each Receipt this Period: 600.00

C.
Full Name (Last, First, Middle Initial): AKBAR, WAHEED
Mailing Address: 580 GOLFVIEW DR
City: SAGINAW State: MI Zip Code: 48603
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date: 1,000.00
Date of Receipt: 07 05 2001
Amount of Each Receipt this Period: 1,000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2,600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 6 OF 5

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): NENSEY, YAWER
Mailing Address: 8932 MAGNOLIA CHASE
City: TAMPA State: FL Zip Code: 33647
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) ▼ DUES
Aggregate Year-to-Date ▼: 30000
Date of Receipt: 07 / 27 / 2001
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: / /
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer: Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: / /
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

TOTAL This Period (last page this line number only) ▶ 9200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) ☐ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

PAGE 1 OF 1

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NAME OF COMMITTEE (In Full): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): SOLOMON SMITH BARNEY
Mailing Address: 200 CRESCENT COURT
City: DALLAS State: TX Zip Code: 75201
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☒ Other (specify): DIVIDEND
Aggregate Year-to-Date: 12.17
Date of Receipt: 12 31 2001
Amount of Each Receipt this Period: 4.68

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify):
Aggregate Year-to-Date:
Date of Receipt: M M D D Y Y Y Y
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify):
Aggregate Year-to-Date:
Date of Receipt: M M D D Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 4.68

TOTAL This Period (last page this line number only) ▶ 4.68

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): APPNA
Mailing Address: 6414 SOUTH CASS AVE
City: WESTMONT State: IL Zip Code: 60559
Purpose of Disbursement: LUNCHEON
Category/Type: 003
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 12 05 2001
Amount of Each Disbursement this Period: 501.00

B.
Full Name (Last, First, Middle Initial): HAESSLER, SUSANNE
Mailing Address: 3401 38th Street, N.W
City: WASHINGTON, State: D.C. Zip Code: 20016
Purpose of Disbursement: Accounting fee
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 08 15 2001
Amount of Each Disbursement this Period: 987.50

C.
Full Name (Last, First, Middle Initial): NAVEED A QURESHI, INC
Mailing Address: 9310 OLD KEENE MILL RD
City: BURKE State: VA Zip Code: 22015
Purpose of Disbursement: ACCOUNTING FEE
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 09 04 2001
Amount of Each Disbursement this Period: 300.00

SUBTOTAL of Disbursements This Page (optional) ▶ 629.50

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): HUTCHINSON, JOAN
Mailing Address: 7610 CARROLL AVE, #310
City: TAKOMA PARK State: MD Zip Code: 20912
Purpose of Disbursement: SECRETARIAL SERVICES
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 07 30 2001
Amount of Each Disbursement this Period: 75.00
8/31/2001 $ 200.00
10/17/2001 $ 400.00

B.
Full Name (Last, First, Middle Initial): APJSA
Mailing Address: 7610 CARROLL AVE, #310
City: TAKOMA PARK State: MD Zip Code: 20912
Purpose of Disbursement: SECRETARIAL SERVICES & OFFICE SUPPLIES
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 07 30 2001
Amount of Each Disbursement this Period: 2853.82

C.
Full Name (Last, First, Middle Initial): QUAID PROJECT OF AMERICA
Mailing Address: 7610 CARROLL AVE, #310
City: TAKOMA PARK State: MD Zip Code: 20912
Purpose of Disbursement: SECRETARIAL SERVICES
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 08 13 2001
Amount of Each Disbursement this Period: 591.15

SUBTOTAL of Disbursements This Page (optional) ▶ 4119.97

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (in Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): BONOIR, DAVID
Mailing Address: 230 NORTH AVE., SUITE 9
City: MOUNT CLEMENS State: MI Zip Code: 48043
Purpose of Disbursement: FUND RAISING
Candidate Name:
Category/Type: 807
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 07 / 30 / 2001
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): CHEVY CHASE BANK
Mailing Address: PO BOX 1296
City: LAUREL State: MD Zip Code: 20707
Purpose of Disbursement: BANK CHARGES
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement:
Amount of Each Disbursement this Period:
7/31/01 $ 10.00
11/9/01 $ 30.00
12/31/01 $ 10.00

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement:
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 5050.00
TOTAL This Period (last page this line number only) ▶ 15467.47

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
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 1/31/02
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