10/08/2010 12:38

Image# 10991247552

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 AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) 8400 Westpark Drive ADDRESS (number and street) 2nd Floor Check if different than previously ٧A McLean 22102 5116 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS NEW **AMENDED** C00168070 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 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Х 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 07 0 1 2010 09 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Denise Clark Type or Print Name of Treasurer Electronically Filed by Denise Clark 10 8 0 2010 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. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 20

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

D [®]D 0 1 07 2010 0.9 3 0 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 24766.28 January 1 (b) Cash on Hand at 20498.96 Begining of Reporting Period 3788.39 13075.93 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 24287.35 37842.21 6(a) and 6(c) for Column B) 15379.60 28934.46 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 8907.75 8907.75 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 20

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From:

M M M 0 7 0 1 7 2 0 1 0 To: M M M 0 9 3 0 7 2 0 1 0

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)	3725.04	11091.76
(ii) Unitemized	50.00	1933.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3775.04	13025.12
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3775.04	13025.12
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received 15. Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	13.35	50.81
8. 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
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3788.39	13075.93
Total Federal Receipts (subtract Line 18(c) from Line 19)	3788.39	13075.93

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 20

	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		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	129.60	684.46
	Expenditures(c) Total Operating Expenditures	129.00	004.40
	(add 21(a)(i), (a)(ii) and (b))	129.60	684.46
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	15250.00	28250.00
24.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(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
	(add Lines 20(a), (b), and (c))		
9.	Other Disbursements	0.00	0.00
80.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) redetal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely 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
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15379.60	28934.46
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	15379.60	28934.46

DETAILED SUMMARY PAGE

of Disbursements

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)	3775.04	13025.12
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	3775.04	13025.12
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	129.60	684.46
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	129.60	684.46

FE6AN026

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 20 (check only one) X 11a 11b 11c 12 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIA	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dale Berry Mailing Address 1200 State Circle City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Huron Valley Ambulance Receipt For: Primary General Other (specify)	State Zip Code MI 48108 C Occupation President Aggregate Year-to-Date 750.00	Date of Receipt M M D D 2 0 1 0 Transaction ID: SA11AI.7490 Amount of Each Receipt this Period 250.00 Contribution 250.00
Full Name (Last, First, Middle Initial) Janice Carbonneau Mailing Address 54 Ridgewood Drive City Atkinson FEC ID number of contributing federal political committee. Name of Employer New Britain EMS Receipt For: Primary General Other (specify)	State Zip Code NH 03811 C Occupation Assistant CEO Aggregate Year-to-Date 225.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Debora Mary Gault Mailing Address 5502 North West High City Waterford FEC ID number of contributing federal political committee. Name of Employer AMR Receipt For: Primary General Other (specify)	State Zip Code WI 53185 C Occupation VP Federal Reimbursements Aggregate Year-to-Date 375.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .	•	450.00

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 20 (check only one) X
\	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
/	AMERICAN AMBULANCE ASSOCIA	TION FEDER	AL PAC (AKA AMBU-PAC)	_
	Full Name (Last, First, Middle Initial) Harvey L. Hall Mailing Address 1001 - 21st Street			Date of Receipt
		Ctata	7:n Codo	07 14 2010
	City <u>Bakersfield</u>	State CA	Zip Code 93301	Transaction ID: SA11AI.7434 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Hall Ambulance Service	Occupation	1	Contribution
	Receipt For: Primary General Other (specify) ▼			
_	Full Name (Last, First, Middle Initial) Harvey L. Hall	Date of Receipt		
	Mailing Address 1001 - 21st Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11AI.7467
	Bakersfield FEC ID number of contributing federal political committee.	CA	93301	Amount of Each Receipt this Period 250.00
	Name of Employer Hall Ambulance Service CEO		1	Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	
_	Full Name (Last, First, Middle Initial) Harvey L. Hall			Date of Receipt
	Mailing Address 1001 - 21st Street	M M / D D / Y Y Y Y Y O D D / 2010		
	City Bakersfield	State CA	Zip Code 93301	Transaction ID: SA11AI.7484
	FEC ID number of contributing federal political committee.	C	93301	Amount of Each Receipt this Period 250.00
	Name of Employer Hall Ambulance Service	Occupation CEO	1	Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2250.00	
	SUBTOTAL of Receipts This Page (optional) .	1		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 20 (check only one)			
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOC	IATION FEDER	AL PAC (AKA AMBU-PAC)				
Full Name (Last, First, Middle Initial) Russell Honeycutt			Date of Receipt			
	Mailing Address 223 Pebblebrook Lane					
City	State	Zip Code	0 7 1 0 2 0 1 0 Transaction ID: SA11AI.7438			
Macon FEC ID number of contributing federal political committee.	GA C	31220	Amount of Each Receipt this Period 100.00			
Name of Employer Hinson Systems/National Reimbu	Occupation Vice Pres		Contribution			
Receipt For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial) Russell Honeycutt	Date of Receipt					
Mailing Address 223 Pebblebrook L	0 8 1 0 2 0 1 0					
City	State	Zip Code	Transaction ID: SA11AI.7471			
Macon GA FEC ID number of contributing federal political committee.		31220	Amount of Each Receipt this Period 100.00			
Name of Employer Hinson Systems/National Reimbu	Occupation Vice Pres		Contribution			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 800.00				
Full Name (Last, First, Middle Initial)			Date of Descript			
Russell Honeycutt Mailing Address 223 Pebblebrook L	Date of Receipt 0 9 1 0 2 0 1 0					
City	State	Zip Code	Transaction ID: SA11AI.7488			
Macon FEC ID number of contributing	GA	31220	Amount of Each Receipt this Period			
federal political committee.			Contribution			
Name of Employer Hinson Systems/National Reimburger	Occupation Vice Pres	sident				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00				
SUBTOTAL of Receipts This Page (optional	al)		300.00			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedu for each category of the Detailed Summary Pa	he (check only only)
An or	y information copied from such Reports and for commercial purposes, other than using t	Statements may not be sold or used by a ne name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIA	TION FEDERAL PAC (AKA AMBU	J-PAC)
<u>/</u>	Full Name (Last, First, Middle Initial) Jon Howell		Date of Receipt
	Mailing Address 112 Cheyenne Trail		09 10 2010
	City	State Zip Code	Transaction ID: SA11AI.7492
	Huntsville FEC ID number of contributing federal political committee.	AL 35806	Amount of Each Receipt this Period 125.00
	Name of Employer Huntsville EMS	Occupation	Contribution
		CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250	00
	Full Name (Last, First, Middle Initial) Louis Meyer	Date of Receipt	
	Mailing Address 10644 N. Oakwilde A	0 9 1 0 / Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: SA11AI.7494
	Stockton	CA 95212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer AMR	Occupation CEO - Regional	Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750	.00
	Full Name (Last, First, Middle Initial) Steve Murphy		Date of Receipt
	Mailing Address 100 S Birch Rd #901	0 9 1 0 / Y Y Y Y Y	
	City	State Zip Code	Transaction ID: SA11AI.7495
	Ft Lauderdale	FL 33316	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer AMR	Occupation Exe VP	Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	750	.00
			625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 20 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIAT	name and add	ress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Julie Ann Rose Mailing Address 1123 Chestnut Drive City Ashtabula FEC ID number of contributing federal political committee. Name of Employer Community Care Ambulance Receipt For: Primary General Other (specify)	State OH C Occupation Executive Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y O 7 1 0 2 0 1 0 Transaction ID: SA11AI.7435 Amount of Each Receipt this Period 83.34 Contribution
Full Name (Last, First, Middle Initial) Julie Ann Rose Mailing Address 1123 Chestnut Drive City Ashtabula FEC ID number of contributing federal political committee. Name of Employer Community Care Ambulance Receipt For: Primary General Other (specify)	State OH C Occupation Executive Aggregate		Date of Receipt M M / D D / Y Y Y Y Y O 8 1 0 2 0 1 0 Transaction ID: SA11AI.7468 Amount of Each Receipt this Period 83.34 Contribution
Full Name (Last, First, Middle Initial) Julie Ann Rose Mailing Address 1123 Chestnut Drive City Ashtabula FEC ID number of contributing federal political committee. Name of Employer Community Care Ambulance Receipt For: Primary General Other (specify)	State OH C Occupation Executive Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y O 9
SUBTOTAL of Receipts This Page (optional)			250.02

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 20 (check only one) X 11a
A 0	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to TION FEDERAL PAC (AKA AMBU-PAC)	o solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Lauren Rubinson Mailing Address 123 Oakmont City Deerfield FEC ID number of contributing federal political committee. Name of Employer MEA Service	State Zip Code IL 60015 C Occupation CEO	Date of Receipt M M M
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
3.	Full Name (Last, First, Middle Initial) Randy Strozyk Mailing Address 9209 181 Street Aven City Bonney Lake	Date of Receipt 0 7 1 0 2 0 1 0 Transaction ID: SA11AI.7437	
	FEC ID number of contributing federal political committee. Name of Employer American Medical Response Receipt For: Primary General Other (specify)	Occupation Vice President Aggregate Year-to-Date ▼ 700.00	Amount of Each Receipt this Period 100.00 Contribution
. –	Full Name (Last, First, Middle Initial) Randy Strozyk	Date of Receipt	
	Mailing Address 9209 181 Street Aver City Bonney Lake FEC ID number of contributing federal political committee. Name of Employer American Medical Response Receipt For: Primary General Other (specify) ▼	State Zip Code WA 98390 C Occupation Vice President Aggregate Year-to-Date 800.00	Transaction ID: SA11AI.7470 Amount of Each Receipt this Period 100.00 Contribution
	SUBTOTAL of Receipts This Page (optional)	I	450.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sch for each category Detailed Summary	of the
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used be name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	AMERICAN AMBULANCE ASSOCIA	TION FEDERAL PAC (AKA AM	BU-PAC)
	Full Name (Last, First, Middle Initial) Randy Strozyk		Date of Receipt
	Mailing Address 9209 181 Street Aven		09 / 10 / 2010
	City Bonney Lake	State Zip Code WA 98390	Transaction ID: SA11AI.7487 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer American Medical Response	Occupation Vice President	Contribution
	Receipt For: Primary General Other (specify) ▼	1 1	00.00
	Full Name (Last, First, Middle Initial) Ronald Thackery	Date of Receipt	
	Mailing Address 9922 S. Silver Maple	09 10 2010	
	City	State Zip Code	Transaction ID: SA11AI.7498
	Highlands Ranch	CO 80129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00 Contribution
	Name of Employer American Medical Response	Occupation VP Risk Management	Contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	50.00
	Full Name (Last, First, Middle Initial) Kurt Williams		Date of Receipt
	Mailing Address 1200 S Martin Luther	07 10 2010	
	City Las Vegas	State Zip Code NV 89102	Transaction ID: SA11AI.7436
	FEC ID number of contributing federal political committee.	NV 89102	Amount of Each Receipt this Period 83.34
	Name of Employer American Medical Response	Contribution	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	83.38
	SUBTOTAL of Receipts This Page (optional) .		433.34

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 20 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIAT	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions
Z	Full Name (Last, First, Middle Initial) Kurt Williams Mailing Address 1200 S Martin Luther City	Date of Receipt M M D D Y Y Y Y Y Y Y Y		
	Las Vegas FEC ID number of contributing federal political committee.	State NV	Zip Code 89102	Amount of Each Receipt this Period 83.34
	Name of Employer American Medical Response Receipt For: Primary General Other (specify) ▼	Occupation CEO Aggregate	e Year-to-Date ▼ 666.72	Contribution
	Full Name (Last, First, Middle Initial) Kurt Williams Mailing Address 1200 S Martin Luther	Date of Receipt 0 9 1 0 2 0 1 0		
	City	State	Zip Code	Transaction ID: SA11AI.7486
	Las Vegas NV FEC ID number of contributing federal political committee.		89102	Amount of Each Receipt this Period 83.34
	Name of Employer American Medical Response	Occupation CEO	on	Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.06	
	Full Name (Last, First, Middle Initial) Gerald Zapolnik Mailing Address 1116 Rathfan Circle			Date of Receipt 0 7 1 0 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.7439
	Saline MI 48176 FEC ID number of contributing federal political committee. Name of Employer Huron Valley Ambulance Occupation VP Support Operations			Amount of Each Receipt this Period
				Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
	SUBTOTAL of Receipts This Page (optional)			266.68

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate sch for each category Detailed Summar	of the (FOR LINE NUMBER: PAGE 14 / 20 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used dress of any political	by any person committee to s	for the purpose of soliciting contributions olicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION	ΓΙΟΝ FEDEF	RAL PAC (AKA AN	MBU-PAC)			
Α.	Full Name (Last, First, Middle Initial) Gerald Zapolnik	Date of Receipt					
	Mailing Address 1116 Rathfan Circle	0 8 1 0 2 0 1 0					
	City	State Zip Code					
	Saline	MI	48176		Transaction ID: SA11AI.7472 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			100.00		
	Name of Employer Huron Valley Ambulance	Occupation VP Supp	ort Operations		Contribution		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼	800.00			
В.	Full Name (Last, First, Middle Initial) Gerald Zapolnik				Date of Receipt		
	Mailing Address 1116 Rathfan Circle				09 10 2010		
	City	State	Zip Code		Transaction ID: SA11AI.7485		
	Saline	MI	48176		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			100.00		
	Name of Employer Huron Valley Ambulance	Occupation VP Supp	ort Operations		Contribution		
	Receipt For:	Aggregate	e Year-to-Date		1		
	Primary General Other (specify) ▼		1 1 1 1 1	900.00			

SUBTOTAL of Receipts This Page (optional)	•	200.00
TOTAL This Period (last page this line number only)	•	3725.04

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NI IMRER:	PAGE 15/20			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b			
Any Information copied from such Reports and Statem		by any person fo	or the purpose of solic	iting contributions			
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any political of	committee to soli	icit contributions from	such committee			
AMERICAN AMBULANCE ASSOCIATION	FEDERAL PAC (AKA AM	(IBU-PAC)					
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 5	ent			
Mailing Address PO Box 53852			08 / 05	y žo jo			
	State Zip Code AZ 85072-3852		Amount of Each Dis	sbursement this Period			
Purpose of Disbursement AmEx Merchant Fees		001		16.63			
Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)						
State: District: Full Name (Last, First, Middle Initial)							
American Express			Transaction ID: S Date of Disbursement	ent			
Mailing Address PO Box 53852			09 / 01	2010			
•	State Zip Code AZ 85072-3852		Amount of Each Dis	sbursement this Period			
Purpose of Disbursement AmEx Merchant Fees		001		16.63			
Candidate Name		Category/ Type					
Senate President	ment For: Primary General Other (specify)						
State: District: Full Name (Last, First, Middle Initial)							
SunTrust Bank			Transaction ID: S Date of Disbursement	ent			
Mailing Address P.O. Box 622227			07 12	ŽOŽOŠ			
	State Zip Code FL 32862-2227		Amount of Each Dis	sbursement this Period			
Purpose of Disbursement SunTrust Merchant Fees		001		33.67			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)						
State: District:	•						
SUBTOTAL of Disbursements This Page (optional) .				66.93			

TOTAL This Period (last page this line number only)

A.

В.

SCHEDULE B (FEC Form 3X)

Senate

District:

President

FOR LINE NUMBER: PAGE 16/20 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC) Full Name (Last, First, Middle Initial) Transaction ID: SB21B.7465 SunTrust Bank Date of Disbursement 05 0 8 2010 Mailing Address P.O. Box 622227 City State Zip Code Amount of Each Disbursement this Period Orlando FL 32862-2227 3.35 Purpose of Disbursement SunTrust Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.7475 SunTrust Bank Date of Disbursement 10 0 9 2010 Mailing Address P.O. Box 622227 City State Zip Code Amount of Each Disbursement this Period 32862-2227 Orlando FL 3.35 Purpose of Disbursement SunTrust Merchant Fees 001 Candidate Name Category/ Type Office Sought: House Disbursement For:

General

SUBTOTAL of Disbursements This Page (optional)	>	6.70
TOTAL This Period (last page this line number only)	•	73.63

Primary

Other (specify)

State:

	O (FEC FOIIII	' Use se	eparate schedule(s)	FOR LINE (check on	NUMBER: PAGE 17 / 20
	SBURSEMEN	Detaile	th category of the ed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
or commercial pur	rposes, other than us				for the purpose of soliciting contributions plicit contributions from such committee
NAME OF COMI AMERICAN AI	` ,	OCIATION FEDER	AL PAC (AKA A	MBU-PAC)	
CANTOR FOR					Transaction ID: SB23.7444 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	P. O. Box 178	13			10 2010
City Richmond		State VA	Zip Code 23226		Amount of Each Disbursement this Perio
Purpose of Disbu Contribution Candidate Name ERIC CANTOR				011 Category/ Type	3000.00
Office Sought: State: VA	X House Senate President District: 07	Disbursement For Primary Other (s	: 2010 X General pecify)	туре	
Full Name (Last, CANTOR FOF	First, Middle Initial) R CONGRESS	1			Transaction ID: SB23.7452 Date of Disbursement
Mailing Address	P. O. Box 178	13			08 / 13 / 2010
City Richmond		State VA	Zip Code 23226		Amount of Each Disbursement this Perio
Purpose of Disbu Contribution				011	250.00
Candidate Name ERIC CANTOR				Category/ Type	
Office Sought:	X House Senate President District: 07	Disbursement For Primary Other (s	: 2010 X General pecify) ▼		
, .	First, Middle Initial) IT FOR CONGRE	SS			Transaction ID: SB23.7447 Date of Disbursement
Mailing Address	PO Box 442				07 16 7 2010
City Allentown		State PA	Zip Code 18105		Amount of Each Disbursement this Perio
Purpose of Disbu Contribution	ırsement			011	1000.00
Candidate Name DENT, CHARL	ES W.			Category/ Type	
Office Sought:	X House Senate President	Disbursement For Primary Other (s			
State: PA	District: 15				

	CHEDULE B (FEC FOIIII)	′ Use sep	parate schedule(s)	FOR LINE (check onl	NUMBER: PAGE 18 / 20
	EMIZED DISBURSEMEN	Detailed	n category of the d Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
	y Information copied from such Reports for commercial purposes, other than usin NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSO	ng the name and addr	ess of any political	committee to so	for the purpose of soliciting contributions olicit contributions from such committee
_	THINE HOTH THINDSETHAGE TROOP	OI/THOIVT EDEIT	121710 (7110171	IVIDO I 7(0)	
	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS	2010			Transaction ID: SB23.7449 Date of Disbursement
	Mailing Address 5915 Eastman Suite 100	Avenue			07 16 7 2010
	City Midland	State MI	Zip Code 48640		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution			010	2500.00
	Candidate Name DAVID CAMP			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: Primary Other (sp	2010 X General pecify)		
	State: MI District: 04				
	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOL	_N			Transaction ID: SB23.7453 Date of Disbursement
	Mailing Address PO BOX 3197				08 / 13 / 2010
	City LITTLE ROCK	State AR	Zip Code 72203		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution			011	1000.00
	Candidate Name BLANCHE L LINCOLN			Category/ Type	
	Office Sought: House X Senate President State: AR District: 00	Disbursement For: Primary Other (sp	2010 X General pecify) ▼		
	Full Name (Last, First, Middle Initial) FRIENDS OF JIM OBERSTAR				Transaction ID: SB23.7446 Date of Disbursement
	Mailing Address 1017 8th St NE				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Washington	State DC	Zip Code 20002		Amount of Each Disbursement this Perio
	Purpose of Disbursement			011	1000.00
	Contribution				
				Category/ Type	
	Contribution Candidate Name JAMES L OBERSTAR Office Sought: X House Senate President	Disbursement For: Primary Other (sp	2010 X General pecify)		
	Contribution Candidate Name JAMES L OBERSTAR Office Sought: X House Senate	Primary	X General		

A.

В.

C.

SCHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)	ule(s) FOR LINE NUMBER: PAGE (check only one)		E 19/	9 / 20						
TEMIZED DISBURSEMENTS		category of the Commary Page		21b 27	Ĺ 2	22 28a	X 23 28b		24 [28c	25 29		26 30b
ny Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)												
AMERICAN AMBULANCE ASSOCIATION	FEDERAL	PAC (AKA AI	MBU-F	AC)								
Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER						Date of	ction ID Disburs	ement	_	_		
Mailing Address 7908 Cincinnati Dayton F Suite I	Road					0 ^M 8 M	/ D	20	' L	ž 0 1	0 ^Y	
,	State OH	Zip Code 45069			<i>A</i>	Amoun	t of Each	n Disb		nent this		od
Purpose of Disbursement Contribution			01	1						1000.00	0	
Candidate Name JOHN A BOEHNER			Cateo Typ									
Office Sought: X House Senate President State: OH District: 08	ement For: Primary Other (spec	2010 X General cify) ▼										
Full Name (Last, First, Middle Initial) HAL ROGERS FOR CONGRESS							ction ID	_	_	450		
Mailing Address P.O. BOX 1214 EAST MT VERNON ST					[0 ^M 7	/ D	16	/ Y	ž 0 1	0 ^Y	
City	State KY	Zip Code 42502			<i>A</i>	Amoun	t of Each	n Disb		nent this		od
Purpose of Disbursement Contribution			01	1						1000.00	0	
Candidate Name HAROLD DALLAS ROGERS			Categ Typ	-								
Senate President	ement For: Primary Other (spec	2010 X General cify) ▼										
State: KY District: 05 Full Name (Last, First, Middle Initial)					Т	ransa	ction ID	: SE	323.7	480		
PETE KING FOR CONGRESS COMMITTI						Date of	Disburs	ement	t / Y	ž 0 1 (ΩY	
Mailing Address POST OFFICE BOX 142					"	^						
SÉAFORD	State NY	Zip Code 11783			<i>f</i>	Amoun	t of Each	n Disb		nent this 2000.00		od
Purpose of Disbursement Contribution Candidate Name			01							_000.00	J	
PETER KING		0015	Cateo Typ									
Office Sought: X House Disburse Senate President State: NY District: 03	ement For: Primary Other (spec	2010 X General cify) ▼										
JBTOTAL of Disbursements This Page (optional)				<u> </u>					4	1000.00	0	
OTAL This Period (last page this line number only)	·			•								
6AN026						FEC	Schedu	ıle B (Form	13X) (Re	evise	d (

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statemor for commercial purposes, other than using the name	for each category of the Detailed Summary Page (chembers)	' '
NAME OF COMMITTEE (In Full) AMERICAN AMBULANCE ASSOCIATION	FEDERAL PAC (AKA AMBU-PA	C)
Full Name (Last, First, Middle Initial) WALDEN FOR CONGRESS Mailing Address PO Box 1091		Transaction ID: SB23.7478 Date of Disbursement O 9
	2010 Primary X General	Amount of Each Disbursement this Period 2500.00
President State: OR District: 02	Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	•	2500.00
TOTAL This Period (last page this line number only)	•	15250.00