11/23/2004 14 : 14

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

AAPSPAC

ADDRESS (number and street) ▼ Z295 Henderson Mill Road

Suite 206

Check if different than previously reported. (ACC)

Atlanta | GA | 30345

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ STATE ▲ ZIPCODE ▲

C00331017

3. IS THIS REPORT — NEW (N) X **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 (12G)

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the: X General (30G) Runoff (30R) Special (30S)

Election on 11 02 2004 in the State of GA

5. Covering Period 10 14 2004 through 11 22 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 Stephen A. Montes, D.O.

Signature of Treasurer Electronically Filed by Stephen A. Montes, D.O. Date 11 23 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)

Write or Type Committee Name
AAPSPAC

Report Covering the Period: From: 10 14 2004 To: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		74688.26
(b) Cash on Hand at Begining of Reporting Period	78287.63	
(c) Total Receipts (from Line 19)	1350.00	34015.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	79637.63	108703.26
7. Total Disbursements (from Line 31)	5407.50	34473.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	74230.13	74230.13
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	3000.00	

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 (Rev. 02/2003)

Write or Type Committee Name

AAPSPAC

Report Covering the Period: From: 10 14 2004 To: 11 22 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)	1140.00	
(ii) Unitemized	210.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	1350.00	33515.00
(b) Political Party Committees	.00	.00
(c) Other Political Committees (such as PACs)	.00	.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ▶	1350.00	33515.00
12. Transfers From Affiliated/Other Party Committees	.00	.00
13. All Loans Received	.00	.00
14. Loan Repayments Received	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	.00	.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	.00	.00
(b) Levin Funds (from Schedule H5)	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1350.00	34015.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1350.00	34015.00

DETAILED SUMMARY PAGE
of Disbursements

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)		
(i) Federal Share	.00	.00
(ii) Non-Federal Share	.00	.00
(b) Other Federal Operating Expenditures	407.50	6948.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	407.50	6948.13
22. Transfers to Affiliated/Other Party Committees	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	.00	.00
24. Independent Expenditure (use Schedule E)	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	.00	.00
26. Loan Repayments Made	.00	.00
27. Loans Made	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	.00	25.00
(b) Political Party Committees	.00	.00
(c) Other Political Committees (such as PACs)	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	.00	25.00
29. Other Disbursements	5000.00	27500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	.00	.00
(ii) "Levin" Share	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5407.50	34473.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	5407.50	34473.13

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	1350.00	33515.00
34. Total Contribution Refunds (from Line 28(d))	.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1350.00	33490.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	407.50	6946.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	407.50	6446.13

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14
(check only one)
[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)
AAPSPAC

A.
Full Name (Last, First, Middle Initial)
Dr. Sheldon L. Kelenick, D.O.
Mailing Address 2627 SE 14th Street
City: Ocala State: FL Zip Code: 34471
FEC ID number of contributing federal political committee: C
Name of Employer: Marion Radiology Center
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 22 2004
Transaction ID: SA11Ai-CN1916
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial)
Dr. Sheldon L. Kelenick, D.O.
Mailing Address 2627 SE 14th Street
City: Ocala State: FL Zip Code: 34471
FEC ID number of contributing federal political committee: C
Name of Employer: Marion Radiology Center
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1926
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial)
Dr. Luis E. Muniz, M.D.
Mailing Address 109 Silver Crest Drive
City: Columbia State: SC Zip Code: 29223
FEC ID number of contributing federal political committee: C
Name of Employer: Midlands Emergency Physicians
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1927
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 150.00

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 7 / 14
(check only one)
[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)
AAPSPAC

A.
Full Name (Last, First, Middle Initial)
Dr. Margaret C. Vives-Austin, M.D.
Mailing Address 4832 Rocky Shoals Circle
City: Evans | State: GA | Zip Code: 30809
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1931
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial)
Randall J Guttridge
Mailing Address 558 Crystal Drive
City: Saint Petersburg | State: FL | Zip Code: 33708
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 10 22 2004
Transaction ID: SA11Ai-CN1915
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial)
Randall J Guttridge
Mailing Address 558 Crystal Drive
City: Saint Petersburg | State: FL | Zip Code: 33708
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1925
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **250.00**

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 8 / 14
(check only one)
[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)
AAPSPAC

A.
Full Name (Last, First, Middle Initial): Jorge L Cambo
Mailing Address: 1143 Raintree Place
City: Winter Park | State: FL | Zip Code: 32789
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 10 22 2004
Transaction ID: SA11Ai-CN1914
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): Jorge L Cambo
Mailing Address: 1143 Raintree Place
City: Winter Park | State: FL | Zip Code: 32789
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1924
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): David G.C. McCann
Mailing Address: 5906 Hwy 39
City | State | Zip Code: 39845
FEC ID number of contributing federal political committee: C
Name of Employer: Miller County Hospital
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 22 2004
Transaction ID: SA11Ai-CN1918
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 150.00

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 9 / 14
(check only one)
[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)
AAPSPAC

A.
Full Name (Last, First, Middle Initial)
David G.C. McCann
Mailing Address 5906 Hwy 39
City | State | Zip Code
39845
FEC ID number of contributing federal political committee. C
Name of Employer: Miller County Hospital
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1928
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial)
Franklin Harrison
Mailing Address 209 Crossroads Plaza Suite 140
City: Mount Vernon | State: IL | Zip Code: 62864
FEC ID number of contributing federal political committee. C
Name of Employer: Self
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 22 2004
Transaction ID: SA11Ai-CN1919
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial)
Franklin Harrison
Mailing Address 209 Crossroads Plaza Suite 140
City: Mount Vernon | State: IL | Zip Code: 62864
FEC ID number of contributing federal political committee. C
Name of Employer: Self
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1929
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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 / 14
(check only one)
[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)
AAPSPAC

A.
Full Name (Last, First, Middle Initial): Rasheed Siddiqui
Mailing Address: 4526 Autumn Ridge
City: Saginaw State: MI Zip Code: 48603
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 10 22 2004
Transaction ID: SA11Ai-CN1920
Amount of Each Receipt this Period: 70.00

B.
Full Name (Last, First, Middle Initial): Rasheed Siddiqui
Mailing Address: 4526 Autumn Ridge
City: Saginaw State: MI Zip Code: 48603
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2006
Primary X General
Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 11 22 2004
Transaction ID: SA11Ai-CN1930
Amount of Each Receipt this Period: 70.00

C.
Full Name (Last, First, Middle Initial): Carolina Sierra
Mailing Address: 500 W. 56th St. #2209
City: New York State: NY Zip Code: 10019
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: 2004
Primary X General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 15 2004
Transaction ID: SA11Ai-CN1913
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **440.00**

TOTAL This Period (last page this line number only) ..... ▶ **1140.00**

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 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)
AAPSPAC

A. Full Name (Last, First, Middle Initial)
Florida Victory

Mailing Address 420 E. Jefferson Street

City: Tallahassee
State: FL
Zip Code: 32301

Purpose of Disbursement
Expenditure

Candidate Name

011
Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB21b-EX381
Date of Disbursement
10 / 25 / 2004

Amount of Each Disbursement this Period
5000.00

Political Contributions

SUBTOTAL of Disbursements This Page (optional) ..... ▶	5000.00
TOTAL This Period (last page this line number only) ..... ▶	5000.00

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26
[ ] 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)
AAPSPAC

A. Full Name (Last, First, Middle Initial)
Termnet Merchant Services

Mailing Address 2090 Powers Ferry Road
Suite 134

City: Atlanta | State: GA | Zip Code: 30339

Purpose of Disbursement
Expenditure

Candidate Name

Category/Type: 001

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB21b-EX386
Date of Disbursement: 10 / 31 / 2004

Amount of Each Disbursement this Period: 25.50

Administrative/Salary/Overhead Expenses

B. Full Name (Last, First, Middle Initial)
American Express

Mailing Address P. O. Box 53852

City: Phoenix | State: AZ | Zip Code: 85072

Purpose of Disbursement
Expenditure

Candidate Name

Category/Type: 001

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB21b-EX385
Date of Disbursement: 10 / 31 / 2004

Amount of Each Disbursement this Period: 5.00

Administrative/Salary/Overhead Expenses

C. Full Name (Last, First, Middle Initial)
Global Payments

Mailing Address 10705 Red Run Blvd

City: Monkton | State: MD | Zip Code: 21111

Purpose of Disbursement
Expenditure

Candidate Name

Category/Type: 001

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB21b-EX384
Date of Disbursement: 10 / 31 / 2004

Amount of Each Disbursement this Period: 377.00

Administrative/Salary/Overhead Expenses

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **407.50**

TOTAL This Period (last page this line number only) ..... ▶ **407.50**

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
AAPSPAC

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ron Klein Campaign

Mailing Address 3333 South Congress Avenue
Suite 305A

City: Delray Beach State: FL ZIP Code: 33445

Nature of Debt (Purpose):
Invoice: Political Contributions

Outstanding Balance Beginning This Period: 500.00

Transaction ID: SD10-INV116

Amount Incurred This Period: .00

Payment This Period: .00

Outstanding Balance at Close of This Period: 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Skip Campbell Campaign

Mailing Address 10094 McNab Road

City: Fort Lauderdale State: FL ZIP Code: 33321

Nature of Debt (Purpose):
Invoice: Political Contributions

Outstanding Balance Beginning This Period: 500.00

Transaction ID: SD10-INV119

Amount Incurred This Period: .00

Payment This Period: .00

Outstanding Balance at Close of This Period: 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jim King Campaign

Mailing Address 1914 Tyty Court

City: Tallahassee State: FL ZIP Code: 32308

Nature of Debt (Purpose):
Invoice: Campaign Contributions Politica

Outstanding Balance Beginning This Period: 500.00

Transaction ID: SD10-INV107

Amount Incurred This Period: .00

Payment This Period: .00

Outstanding Balance at Close of This Period: 500.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**1500.00**
2) **TOTALS** This Period (last page this line number only) ..... ▶	
3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
AAPSPAC

(Use separate schedule(s) for each numbered line)	PAGE 14 / 14
FOR LINE NUMBER: (check only one)	9
	X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Friends Of Lane Evans

Mailing Address PO Box 5263

City: Rock Island State: IL ZIP Code: 61204

Nature of Debt (Purpose):
Invoice: Friend Of Lane Evans House 17 (

Transaction ID: SD10-INV124

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1500.00	.00	.00	1500.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	1500.00
2) **TOTALS** This Period (last page this line number only) ..... ▶	3000.00
3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶	
4) **ADD 2)** and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	