12/04/2002 17 : 41

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

AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼ 1101 VERMONT AVENUE, NW

12TH FLOOR

Check if different than previously reported. (ACC)

WASHINGTON | DC | 20005 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00000422

CITY ▲ | STATE ▲ | ZIPCODE ▲

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 (M13)

(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 **P**ost -Election Report for the: X General (30G) | Runoff (30R) | Special (30S)

Election on 11 05 2002 in the State of DC

5. Covering Period 10 17 2002 through 11 25 2002

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 KEVIN WALKER

Signature of Treasurer Electronically Filed by KEVIN WALKER Date 12 04 2002

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 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10 17 2002 To: 11 25 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2002		2601547.70
(b) Cash on Hand at Begining of Reporting Period	596542.67	
(c) Total Receipts (from Line 19)	169064.24	2002818.87
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	765606.91	4604366.57
7. Total Disbursements (from Line 30)	652793.80	4491553.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	112813.11	112813.11
9. Debts and Obligations owed **TO** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. 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)

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 1/2001)

Write or Type Committee Name

AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10 17 2002 To: 11 25 2002

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)	104310.00	
(ii) Unitemized	52369.94	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	156679.94	1870661.94
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ..... ▶	156679.94	1870661.94
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	1787.55
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	4000.00	16000.00
17. Other Federal Receipts Dividends, Interest, etc.)	8384.30	114369.38
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	169064.24	2002818.87
20. Total Federal Receipts (subtract Line 18 from Line 19) ..... ▶	169064.24	2002818.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	3415.41	134900.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	3415.41	134900.11
22. Transfers to Affiliated/Other Party Committees	110.00	114792.45
23. Contributions to Federal Candidates/Committees and Other Political Committees	94000.00	2300235.25
24. Independent Expenditure (use Schedule E)	555218.39	1940575.65
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	350.00
(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	350.00
29. Other Disbursements	50.00	700.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	652793.80	4491553.46
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	652793.80	4491553.46
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	156679.94	1870661.94
33. Total Contribution Refunds (from Line 28(d))	0.00	350.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	156679.94	1870311.94
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	3415.41	134900.11
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1787.55
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	3415.41	133112.56

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 51

[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)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ARIZONA MEDICAL PAC
Mailing Address: 810 W BETHANY HOME ROAD
City: PHOENIX State: AZ Zip Code: 85013
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 12790.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 270.00
Transaction ID: SA11A1.10663

B.
Full Name (Last, First, Middle Initial): ARKANSAS MEDICAL PAC
Mailing Address: PO BOX 55088
City: LITTLE ROCK State: AR Zip Code: 72215
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 7130.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 500.00
Transaction ID: SA11A1.10708

C.
Full Name (Last, First, Middle Initial): COLORADO MEDICAL PAC
Mailing Address: PO BOX 17550
City: DENVER State: CO Zip Code: 80217
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 8780.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 3160.00
Transaction ID: SA11A1.10670

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3930.00**

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: (check only one) PAGE 6 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): COLORADO MEDICAL PAC
Mailing Address: PO BOX 17550
City: DENVER State: CO Zip Code: 80217
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 10200.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 1420.00
Transaction ID: SA11A1.10681

B.
Full Name (Last, First, Middle Initial): COLORADO MEDICAL PAC
Mailing Address: PO BOX 17550
City: DENVER State: CO Zip Code: 80217
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 12800.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 2400.00
Transaction ID: SA11A1.10707

C.
Full Name (Last, First, Middle Initial): CRAIG WIERUM
Mailing Address: 3715 WOODMONT LANE
City: NASHVILLE State: TN Zip Code: 37215
FEC ID number of contributing federal political committee.
Name of Employer: SELF EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 11 25 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.10715

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4070.00**

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: (check only one) PAGE 7 / 51

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID L EDELMAN MD
Mailing Address: 3475 TORRANCE BOULEVARD
City: TORRANCE State: CA Zip Code: 90503
FEC ID number of contributing federal political committee.
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 11 12 2002
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.10697

B.
Full Name (Last, First, Middle Initial): DELAWARE MEDICAL PAC
Mailing Address: 1925 LOVERING AVENUE
City: WILMINGTON State: DE Zip Code: 19806
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 6350.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 350.00
Transaction ID: SA11A1.10711

C.
Full Name (Last, First, Middle Initial): FLORIDA MEDICAL PAC
Mailing Address: PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 64375.00
Date of Receipt: 10 23 2002
Amount of Each Receipt this Period: 3000.00
Transaction ID: SA11A1.10675

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3650.00**

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: (check only one) PAGE 8 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FLORIDA MEDICAL PAC
Mailing Address: PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 65505.00
Date of Receipt: 10 23 2002
Amount of Each Receipt this Period: 1130.00
Transaction ID: SA11A1.10679

B.
Full Name (Last, First, Middle Initial): FLORIDA MEDICAL PAC
Mailing Address: PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 69705.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 4200.00
Transaction ID: SA11A1.10687

C.
Full Name (Last, First, Middle Initial): FLORIDA MEDICAL PAC
Mailing Address: PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 74615.00
Date of Receipt: 11 12 2002
Amount of Each Receipt this Period: 4910.00
Transaction ID: SA11A1.10672

SUBTOTAL of Receipts This Page (optional) ..... ▶ **10240.00**

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: (check only one) PAGE 9 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FLORIDA MEDICAL PAC
Mailing Address: PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 76125.00
Date of Receipt: 11 12 2002
Amount of Each Receipt this Period: 1510.00
Transaction ID: SA11A1.10673

B.
Full Name (Last, First, Middle Initial): GEORGIA MEDICAL PAC
Mailing Address: 1330 W PEACHTREE STREET
City: ATLANTA State: GA Zip Code: 30309
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 79070.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 2280.00
Transaction ID: SA11A1.10701

C.
Full Name (Last, First, Middle Initial): IDAHO MEDICAL PAC
Mailing Address: PO BOX 2666
City: BOISE State: ID Zip Code: 83701
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 5300.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.10667

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4040.00**

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: (check only one) PAGE 10 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): IDAHO MEDICAL PAC
Mailing Address: PO BOX 2666
City: BOISE State: ID Zip Code: 83701
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 5800.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 300.00
Transaction ID: SA11A1.10668

B.
Full Name (Last, First, Middle Initial): IDAHO MEDICAL PAC
Mailing Address: PO BOX 2666
City: BOISE State: ID Zip Code: 83701
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 6800.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 1000.00
Transaction ID: SA11A1.10669

C.
Full Name (Last, First, Middle Initial): IDAHO MEDICAL PAC
Mailing Address: PO BOX 2666
City: BOISE State: ID Zip Code: 83701
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 7050.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 450.00
Transaction ID: SA11A1.10695

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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: (check only one) PAGE 11 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): INDEPENDENT MEDICINES PAC
Mailing Address: PO BOX 120909
City: NASHVILLE State: TN Zip Code: 37212
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 32100.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 1650.00
Transaction ID: SA11A1.10684

B.
Full Name (Last, First, Middle Initial): IOWA MEDICAL PAC
Mailing Address: 1001 GRAND AVENUE
City: W. DES MOINES State: IA Zip Code: 50265
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 15850.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 350.00
Transaction ID: SA11A1.10702

C.
Full Name (Last, First, Middle Initial): KANSAS MEDICAL PAC
Mailing Address: 623 SW 10TH
City: TOPEKA State: KS Zip Code: 66612
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 12380.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 700.00
Transaction ID: SA11A1.10690

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2700.00**

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: (check only one) PAGE 12 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KENTUCKY EDUC MEDICAL PAC
Mailing Address: 4965 US HIGHWAY 42
City: LOUISVILLE State: KY Zip Code: 40222
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 33520.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 1780.00
Transaction ID: SA11A1.10692

B.
Full Name (Last, First, Middle Initial): LOUISIANA MEDICAL PAC
Mailing Address: 6767 PERKINS ROAD
City: BATON ROUGE State: LA Zip Code: 70802
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 34350.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.10666

C.
Full Name (Last, First, Middle Initial): LOUISIANA MEDICAL PAC
Mailing Address: 6767 PERKINS ROAD
City: BATON ROUGE State: LA Zip Code: 70802
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 38700.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 4350.00
Transaction ID: SA11A1.10705

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6380.00**

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: (check only one) PAGE 13 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LOUISIANA MEDICAL PAC
Mailing Address: 6767 PERKINS ROAD
City: BATON ROUGE State: LA Zip Code: 70802
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 40350.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 1650.00
Transaction ID: SA11A1.10710

B.
Full Name (Last, First, Middle Initial): MARYLAND MEDICAL PAC
Mailing Address: 1211 CATHEDRAL STREET
City: BALTIMORE State: MD Zip Code: 21201
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 24817.50
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 850.00
Transaction ID: SA11A1.10683

C.
Full Name (Last, First, Middle Initial): MINNESOTA MEDICAL PAC
Mailing Address: PO BOX 18855
City: MINNEAPOLIS State: MN Zip Code: 55418
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 14810.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 630.00
Transaction ID: SA11A1.10665

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3130.00**

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: (check only one) PAGE 14 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MINNESOTA MEDICAL PAC
Mailing Address: PO BOX 18655
City: MINNEAPOLIS State: MN Zip Code: 55418
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 16990.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 2180.00
Transaction ID: SA11A1.10709

B.
Full Name (Last, First, Middle Initial): MISSOURI MEDICAL PAC
Mailing Address: PO BOX 1402
City: JEFFERSON CITY State: MO Zip Code: 65102
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 35850.00
Date of Receipt: 10 23 2002
Amount of Each Receipt this Period: 1170.00
Transaction ID: SA11A1.10678

C.
Full Name (Last, First, Middle Initial): MISSOURI MEDICAL PAC
Mailing Address: PO BOX 1402
City: JEFFERSON CITY State: MO Zip Code: 65102
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 42210.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 6360.00
Transaction ID: SA11A1.10694

SUBTOTAL of Receipts This Page (optional) ..... ▶ **9710.00**

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: (check only one) PAGE 15 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NC MEDICAL POL EDUC & ACTION CMMTT
Mailing Address: PO BOX 25834
City: RALEIGH State: NC Zip Code: 27611
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 45840.00
Date of Receipt: 10 17 2002
Amount of Each Receipt this Period: 2500.00
Transaction ID: SA11A1.10664

B.
Full Name (Last, First, Middle Initial): NC MEDICAL POL EDUC & ACTION CMMTT
Mailing Address: PO BOX 25834
City: RALEIGH State: NC Zip Code: 27611
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 48290.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 2450.00
Transaction ID: SA11A1.10682

C.
Full Name (Last, First, Middle Initial): NEVADA MEDICAL PAC
Mailing Address: 3660 BAKER LANE
City: RENO State: NV Zip Code: 89509
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 11300.00
Date of Receipt: 10 23 2002
Amount of Each Receipt this Period: 1050.00
Transaction ID: SA11A1.10674

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6000.00**

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: (check only one) PAGE 16 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NEW HAMPSHIRE MEDICAL PAC
Mailing Address: 4 PARK STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 760.00
Transaction ID: SA11A1.10712

B.
Full Name (Last, First, Middle Initial): NEW JERSEY MEDICAL PAC
Mailing Address: 2 PRINCESS ROAD
City: LAWRENCEVILLE State: NJ Zip Code: 08648
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 23 2002
Amount of Each Receipt this Period: 400.00
Transaction ID: SA11A1.10677

C.
Full Name (Last, First, Middle Initial): NORTH DAKOTA MEDICAL ASSOCIATION
Mailing Address: PO BOX 1198
City: BISMARCK State: ND Zip Code: 58502
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 3700.00
Date of Receipt: 10 23 2002
Amount of Each Receipt this Period: 900.00
Transaction ID: SA11A1.10680

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2060.00**

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: (check only one) PAGE 17 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): OREGON MEDICAL PAC
Mailing Address: 5210 SW CORBETT STREET
City: PORTLAND State: OR Zip Code: 97201
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 33860.00
Date of Receipt: 11 12 2002
Amount of Each Receipt this Period: 7470.00
Transaction ID: SA11A1.10671

B.
Full Name (Last, First, Middle Initial): PENNSYLVANIA MEDICAL PAC
Mailing Address: PO BOX 8820
City: HARRISBURG State: PA Zip Code: 17105
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 71050.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 1050.00
Transaction ID: SA11A1.10688

C.
Full Name (Last, First, Middle Initial): PENNSYLVANIA MEDICAL PAC
Mailing Address: PO BOX 8820
City: HARRISBURG State: PA Zip Code: 17105
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 75200.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 4150.00
Transaction ID: SA11A1.10700

SUBTOTAL of Receipts This Page (optional) ..... ▶ **12670.00**

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: (check only one) PAGE 18 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PENNSYLVANIA MEDICAL PAC
Mailing Address: PO BOX 8820
City: HARRISBURG State: PA Zip Code: 17105
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 79450.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 4250.00
Transaction ID: SA11A1.10704

B.
Full Name (Last, First, Middle Initial): ROBERT F HAVERLY MD
Mailing Address: 4060 AVENIEL COURT
City: ERIE State: PA Zip Code: 16506
FEC ID number of contributing federal political committee.
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 08 2002
Amount of Each Receipt this Period: 250.00
Transaction ID: SA11A1.10699

C.
Full Name (Last, First, Middle Initial): SOUTH CAROLINA MEDICAL PAC
Mailing Address: PO BOX 11188
City: COLUMBIA State: SC Zip Code: 29211
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 11530.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 2510.00
Transaction ID: SA11A1.10706

SUBTOTAL of Receipts This Page (optional) ..... ▶ **7010.00**

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: (check only one) PAGE 19 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SOUTH DAKOTA MEDICAL PAC
Mailing Address: 1323 S MINNESOTA AVENUE
City: SIOUX FALLS State: SD Zip Code: 57105
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 12700.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 700.00
Transaction ID: SA11A1.10693

B.
Full Name (Last, First, Middle Initial): TEXAS MEDICAL PAC
Mailing Address: 401 W 15TH STREET
City: AUSTIN State: TX Zip Code: 78701
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 226530.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 14620.00
Transaction ID: SA11A1.10685

C.
Full Name (Last, First, Middle Initial): VIRGINIA MEDICAL PAC
Mailing Address: 4205 DOVER ROAD
City: RICHMOND State: VA Zip Code: 23221
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 39850.00
Date of Receipt: 11 06 2002
Amount of Each Receipt this Period: 3950.00
Transaction ID: SA11A1.10691

SUBTOTAL of Receipts This Page (optional) ..... ▶ **19270.00**

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: (check only one) PAGE 20 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): VIRGINIA MEDICAL PAC
Mailing Address: 4205 DOVER ROAD
City: RICHMOND State: VA Zip Code: 23221
FEC ID number of contributing federal political committee.
Name of Employer: N/A
Occupation: N/A
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 44100.00
Date of Receipt: 11 15 2002
Amount of Each Receipt this Period: 4250.00
Transaction ID: SA11A1.10703

B.
Full Name (Last, First, Middle Initial): WASHINGTON MEDICAL PAC
Mailing Address: 2033 SIXTH AVENUE
City: SEATTLE State: WA Zip Code: 98121
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 26040.00
Date of Receipt: 10 31 2002
Amount of Each Receipt this Period: 1500.00
Transaction ID: SA11A1.10686

C.
Full Name (Last, First, Middle Initial): WASHINGTON MEDICAL PAC
Mailing Address: 2033 SIXTH AVENUE
City: SEATTLE State: WA Zip Code: 98121
FEC ID number of contributing federal political committee.
Name of Employer: NA
Occupation: NA
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 26590.00
Date of Receipt: 11 22 2002
Amount of Each Receipt this Period: 550.00
Transaction ID: SA11A1.10713

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6300.00**

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: (check only one) PAGE 21 / 51

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
WISCONSIN PHYSICIANS MEDICAL PAC

Mailing Address
PO BOX 2595

City: MADISON State: WI Zip Code: 53701

FEC ID number of contributing federal political committee.

Name of Employer: N/A
Occupation: N/A

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 9170.00

Date of Receipt: 11 06 2002

Amount of Each Receipt this Period: 250.00

Transaction ID: SA11A1.10689

B.
Full Name (Last, First, Middle Initial)
WYOMING MEDICAL PAC

Mailing Address
PO DRAWER 4009

City: CHEYENNE State: WY Zip Code: 82003

FEC ID number of contributing federal political committee.

Name of Employer: NA
Occupation: NA

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 5350.00

Date of Receipt: 10 17 2002

Amount of Each Receipt this Period: 1150.00

Transaction ID: SA11A1.10682

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1400.00**

TOTAL This Period (last page this line number only) ..... ▶ **104310.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 22 / 51

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
LATOURETTE FOR CONGRESS COMMITTEE

Mailing Address
1004 MILLRIDGE ROAD

City: HIGHLAND HEIGHTS State: OH Zip Code: 44143

FEC ID number of contributing federal political committee: C00284174

Name of Employer:

Occupation:

Receipt For: 2002
X Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: M 11 D 12 Y 2002

Amount of Each Receipt this Period: 4000.00

REFUND-4/9/02 CHK.

Transaction ID: SA16.10788

B.

C.

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	4000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 23 / 51

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
RIGGS INVESTMENT MANAGEMENT COMPANY

Mailing Address
PO BOX 96211

City: WASHINGTON
State: DC
Zip Code: 20090

FEC ID number of contributing federal political committee.

Name of Employer:
Occupation:

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
114369.38

Date of Receipt
10 31 2002

Amount of Each Receipt this Period
8384.30

INTEREST

Transaction ID: SA17.10717

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ 8384.30

TOTAL This Period (last page this line number only) ..... ▶ 8384.30

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)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAYMENTECH
Mailing Address: 4 NORTHEASTERN BLVD
City: SALEM State: NH Zip Code: 13079
Purpose of Disbursement: CREDIT CARD BANK CHARGES
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 31 / 2002
Amount of Each Disbursement this Period: 52.35
Transaction ID: SB21B.10784

B.
Full Name (Last, First, Middle Initial): PAYMENTECH
Mailing Address: 4 NORTHEASTERN BLVD
City: SALEM State: NH Zip Code: 13079
Purpose of Disbursement: CREDIT CARD BANK CHARGES
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 25 / 2002
Amount of Each Disbursement this Period: 251.18
Transaction ID: SB21B.10783

C.
Full Name (Last, First, Middle Initial): RIGGS INVESTMENT MANAGEMENT COMPANY
Mailing Address: PO BOX 96211
City: WASHINGTON State: DC Zip Code: 20090
Purpose of Disbursement: LOSS ON INVESTMENTS
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 31 / 2002
Amount of Each Disbursement this Period: 904.00
Transaction ID: SB21B.10785

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1207.53**

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)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
RIGGS INVESTMENT MANAGEMENT COMPANY

Mailing Address
PO BOX 96211
City: WASHINGTON State: DC Zip Code: 20090

Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
10 / 31 / 2002

Amount of Each Disbursement this Period
1411.00

Transaction ID: SB21B.10786

B.
Full Name (Last, First, Middle Initial)
RIGGS NATIONAL BANK

Mailing Address
PO BOX 1912
City: WASHINGTON State: DC Zip Code: 20074

Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
10 / 31 / 2002

Amount of Each Disbursement this Period
796.88

Transaction ID: SB21B.10787

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2207.88**

TOTAL This Period (last page this line number only) ..... ▶ **3415.41**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
FLORIDA MEDICAL PAC

Mailing Address
PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302

Purpose of Disbursement
TRANSFER OF FUNDS JOINT FUNDRAISING

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 08 / 2002

Amount of Each Disbursement this Period: 10.00

Transaction ID: SB22.10779

B.
Full Name (Last, First, Middle Initial)
FLORIDA MEDICAL PAC

Mailing Address
PO BOX 10269
City: TALLAHASSEE State: FL Zip Code: 32302

Purpose of Disbursement
TRANSFER OF FUNDS JOINT FUNDRAISING

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 11 / 2002

Amount of Each Disbursement this Period: 50.00

Transaction ID: SB22.10719

C.
Full Name (Last, First, Middle Initial)
VIRGINIA MEDICAL PAC

Mailing Address
4205 DOVER ROAD
City: RICHMOND State: VA Zip Code: 23221

Purpose of Disbursement
TRANSFER OF FUNDS JOINT FUNDRAISING

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 08 / 2002

Amount of Each Disbursement this Period: 50.00

Transaction ID: SB22.10780

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **110.00**

TOTAL This Period (last page this line number only) ..... ▶ **110.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
BAKER FOR CONGRESS COMMITTEE

Mailing Address
PO BOX 1694
City: BATON ROUGE State: LA Zip Code: 70821

Purpose of Disbursement
2002 GENERAL

Candidate Name
RICHARD HUGH BAKER

Category/Type

Office Sought: X House / Senate / President
State: LA District: 06

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 28 / 2002

Amount of Each Disbursement this Period
2500.00

Transaction ID: SB23.10758

B.
Full Name (Last, First, Middle Initial)
BERKLEY FOR CONGRESS

Mailing Address
3069 CONQUISTA COURT
City: LAS VEGAS State: NV Zip Code: 89121

Purpose of Disbursement
2002 GENERAL

Candidate Name
SHELLEY BERKLEY

Category/Type

Office Sought: X House / Senate / President
State: NV District: 01

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10732

C.
Full Name (Last, First, Middle Initial)
BILLY TAUZIN CONGRESSIONAL COMMITTEE

Mailing Address
412 SOUTH VAN
City: HOUMA State: LA Zip Code: 70360

Purpose of Disbursement
2002 GENERAL

Candidate Name
W J BILLY TAUZIN

Category/Type

Office Sought: X House / Senate / President
State: LA District: 03

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 28 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10756

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **12500.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
BLUMENAUER FOR CONGRESS

Mailing Address
PO BOX 1396
City: PORTLAND State: OR Zip Code: 97207

Purpose of Disbursement
2002 GENERAL

Candidate Name
EARL BLUMENAUER

Category/Type

Office Sought: X House / Senate / President
State: OR District: 03

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement: 10 / 24 / 2002

Amount of Each Disbursement this Period: 1500.00

Transaction ID: SB23.10736

B.
Full Name (Last, First, Middle Initial)
BOB BRADY FOR CONGRESS

Mailing Address
ONE LOGAN SQUARE
City: PHILADELPHIA State: PA Zip Code: 19103

Purpose of Disbursement
2002 GENERAL-VOID 9/25/02 CHK.

Candidate Name
ROBERT A BRADY

Category/Type

Office Sought: X House / Senate / President
State: PA District: 01

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement: 10 / 29 / 2002

Amount of Each Disbursement this Period: -2500.00

Transaction ID: SB23.10760

C.
Full Name (Last, First, Middle Initial)
BOB MATSUI FOR CONGRESS COMMITTEE

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL

Candidate Name
ROBERT MATSUI

Category/Type

Office Sought: X House / Senate / President
State: CA District: 05

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement: 10 / 29 / 2002

Amount of Each Disbursement this Period: 4000.00

Transaction ID: SB23.10765

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
BOB MATSUI FOR CONGRESS COMMITTEE

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL-VOID 8/30/02 CHK.

Candidate Name
ROBERT MATSUI

Category/Type

Office Sought: X House / Senate / President
State: CA District: 05

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
-4000.00

Transaction ID: SB23.10771

B.
Full Name (Last, First, Middle Initial)
BOYD FOR CONGRESS

Mailing Address
PO BOX 15703
City: TALLAHASSEE State: FL Zip Code: 32317

Purpose of Disbursement
2002 GENERAL

Candidate Name
F ALLEN JR BOYD

Category/Type

Office Sought: X House / Senate / President
State: FL District: 02

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10718

C.
Full Name (Last, First, Middle Initial)
BOYD FOR CONGRESS

Mailing Address
PO BOX 15703
City: TALLAHASSEE State: FL Zip Code: 32317

Purpose of Disbursement
2002 GENERAL-VOID 10/10/02 CHK

Candidate Name
F ALLEN JR BOYD

Category/Type

Office Sought: X House / Senate / President
State: FL District: 02

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
-5000.00

Transaction ID: SB23.10777

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **-4000.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
CALDER CLAY FOR US CONGRESS

Mailing Address
885 Wimbish Road
City: Macon State: GA Zip Code: 31210

Purpose of Disbursement
2002 GENERAL

Candidate Name
CALDER BENJAMIN III CLAY

Category/Type

Office Sought: X House / Senate / President
State: GA District: 03

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement: 10 / 24 / 2002

Amount of Each Disbursement this Period: 5000.00

Transaction ID: SB23.10728

B.
Full Name (Last, First, Middle Initial)
COLE FOR CONGRESS

Mailing Address
PO BOX 722256
City: NORMAN State: OK Zip Code: 73070

Purpose of Disbursement
2002 GENERAL

Candidate Name
JOHN HOWARD COBLE

Category/Type

Office Sought: X House / Senate / President
State: OK District: 04

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement: 10 / 30 / 2002

Amount of Each Disbursement this Period: 5000.00

Transaction ID: SB23.10776

C.
Full Name (Last, First, Middle Initial)
COMBEST CONGRESSIONAL COMMITTEE

Mailing Address
P O BOX 10867
City: LUBBOCK State: TX Zip Code: 79408

Purpose of Disbursement
2002 GENERAL

Candidate Name
LARRY ED COMBEST

Category/Type

Office Sought: X House / Senate / President
State: TX District: 19

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement: 10 / 24 / 2002

Amount of Each Disbursement this Period: 2000.00

Transaction ID: SB23.10744

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **12000.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
CONGRESSMAN JOE BARTON COMMITTEE

Mailing Address
PO BOX 1444
City: ENNIS State: TX Zip Code: 75120

Purpose of Disbursement
2002 GENERAL

Candidate Name
JOE LINUS BARTON

Category/Type

Office Sought: X House / Senate / President
State: TX District: 06

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10738

B.
Full Name (Last, First, Middle Initial)
CUBIN FOR CONGRESS

Mailing Address
PO BOX 4857
City: CASPER State: WY Zip Code: 82604

Purpose of Disbursement
2002 GENERAL

Candidate Name
BARBARA L CUBIN

Category/Type

Office Sought: X House / Senate / President
State: WY District: 01

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10749

C.
Full Name (Last, First, Middle Initial)
CULBERSON FOR CONGRESS

Mailing Address
14133 MEMORIAL DR STE 5
City: HOUSTON State: TX Zip Code: 77079

Purpose of Disbursement
2002 GENERAL

Candidate Name
JOHN A CULBERSON

Category/Type

Office Sought: X House / Senate / President
State: TX District: 07

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
2500.00

Transaction ID: SB23.10740

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8500.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
DAVID VITTER FOR CONGRESS

Mailing Address
202 EAST LIVINGSTON PLACE
City: METAIRIE State: LA Zip Code: 70005

Purpose of Disbursement
2002 GENERAL

Candidate Name
DAVID B VITTER

Category/Type

Office Sought: X House / Senate / President
State: LA District: 01

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 28 / 2002

Amount of Each Disbursement this Period
2500.00

Transaction ID: SB23.10755

B.
Full Name (Last, First, Middle Initial)
DOYLE FOR CONGRESS COMMITTEE

Mailing Address
2227 HAMPTON STREET
City: PITTSBURGH State: PA Zip Code: 15218

Purpose of Disbursement
2002 GENERAL-VOID 9/25/02 CHK.

Candidate Name
MIKE DOYLE

Category/Type

Office Sought: X House / Senate / President
State: PA District: 14

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
-3000.00

Transaction ID: SB23.10763

C.
Full Name (Last, First, Middle Initial)
ENZI FOR US SENATE

Mailing Address
PO BOX 2775
City: CODY State: WY Zip Code: 82414

Purpose of Disbursement
2002 GENERAL

Candidate Name
MICHAEL B ENZI

Category/Type

Office Sought: House / X Senate / President
State: WY District: 00

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
3000.00

Transaction ID: SB23.10748

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FATTAH FOR CONGRESS
Mailing Address: 7478 RHOADES STREET
City: PHILADELPHIA State: PA Zip Code: 19151
Purpose of Disbursement: 2002 GENERAL-VOID 9/25/02 CHK.
Candidate Name: CHAKA FATTAH
Category/Type
Office Sought: X House / Senate / President
State: PA District: 02
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 29 2002
Amount of Each Disbursement this Period: -2500.00
Transaction ID: SB23.10761

B.
Full Name (Last, First, Middle Initial): FRIENDS OF FARR
Mailing Address: 555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814
Purpose of Disbursement: 2002 GENERAL
Candidate Name: SAM FARR
Category/Type
Office Sought: X House / Senate / President
State: CA District: 17
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 29 2002
Amount of Each Disbursement this Period: 2000.00
Transaction ID: SB23.10766

C.
Full Name (Last, First, Middle Initial): FRIENDS OF FARR
Mailing Address: 555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814
Purpose of Disbursement: 2002 GENERAL-VOID 8/30/02 CHK.
Candidate Name: SAM FARR
Category/Type
Office Sought: X House / Senate / President
State: CA District: 17
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 29 2002
Amount of Each Disbursement this Period: -2000.00
Transaction ID: SB23.10772

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **-2500.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
FRIENDS OF JACK KINGSTON

Mailing Address
PO BOX 2133
City: SAVANNAH State: GA Zip Code: 31402

Purpose of Disbursement
2002 GENERAL

Candidate Name
JOHN HEDDENS KINGSTON

Category/Type

Office Sought: X House / Senate / President
State: GA District: 01

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 28 / 2002

Amount of Each Disbursement this Period
1500.00

Transaction ID: SB23.10751

B.
Full Name (Last, First, Middle Initial)
FRIENDS OF JEB HENSARLING

Mailing Address
PO Box 820504
City: Dallas State: TX Zip Code: 75382

Purpose of Disbursement
2002 PRIMARY DEFICIT

Candidate Name
THOMAS JEB HENSARLING

Category/Type

Office Sought: X House / Senate / President
State: TX District: 05

Disbursement For: 2002 / X Primary / General / Other (specify)

Date of Disbursement
10 / 28 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10759

C.
Full Name (Last, First, Middle Initial)
FRIENDS OF SAM JOHNSON

Mailing Address
PO BOX 860096
City: PLANO State: TX Zip Code: 75086

Purpose of Disbursement
2002 GENERAL

Candidate Name
SAMUEL ROBERT JOHNSON

Category/Type

Office Sought: X House / Senate / President
State: TX District: 03

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
2500.00

Transaction ID: SB23.10737

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **9000.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): GEORGIANS FOR ISAKSON
Mailing Address: 6065 Roswell Road
City: Atlanta State: GA Zip Code: 30328
Purpose of Disbursement: 2002 GENERAL
Candidate Name: JOHN HARDY ISAKSON
Category/Type
Office Sought: X House / Senate / President
State: GA District: 06
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 28 / 2002
Amount of Each Disbursement this Period: 1500.00
Transaction ID: SB23.10752

B.
Full Name (Last, First, Middle Initial): GIBBONS FOR CONGRESS
Mailing Address: 542 1/2 PLUMAS ST
City: RENO State: NV Zip Code: 89509
Purpose of Disbursement: 2002 GENERAL
Candidate Name: JAMES A GIBBONS
Category/Type
Office Sought: X House / Senate / President
State: NV District: 02
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 24 / 2002
Amount of Each Disbursement this Period: 5000.00
Transaction ID: SB23.10734

C.
Full Name (Last, First, Middle Initial): J D HAYWORTH FOR CONGRESS
Mailing Address: 10789 N. 90th Street
City: Scottsdale State: AZ Zip Code: 85260
Purpose of Disbursement: 2002 GENERAL
Candidate Name: HAYWORTH, J D
Category/Type
Office Sought: X House / Senate / President
State: AZ District: 05
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 24 / 2002
Amount of Each Disbursement this Period: 1000.00
Transaction ID: SB23.10726

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7500.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JEFF FLAKE FOR CONGRESS

Mailing Address
PO BOX 21447
City: MESA State: AZ Zip Code: 85277

Purpose of Disbursement
2002 GENERAL

Candidate Name
JEFF L FLAKE

Category/Type

Office Sought: X House / Senate / President
State: AZ District: 06

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10727

B.
Full Name (Last, First, Middle Initial)
JOHN SHADEGG FOR CONGRESS

Mailing Address
PO BOX 45444
City: PHOENIX State: AZ Zip Code: 85064

Purpose of Disbursement
2002 GENERAL

Candidate Name
SHADEGG, JOHN BARDEN

Category/Type

Office Sought: X House / Senate / President
State: AZ District: 03

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10724

C.
Full Name (Last, First, Middle Initial)
JOHN T DOOLITTLE FOR CONGRESS

Mailing Address
400 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL

Candidate Name
JOHN T DOOLITTLE

Category/Type

Office Sought: X House / Senate / President
State: CA District: 04

Disbursement For: 2002 Primary X General Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
2000.00

Transaction ID: SB23.10764

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

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)
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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JOHN T DOOLITTLE FOR CONGRESS

Mailing Address
400 CAPITOL MALL

City: SACRAMENTO | State: CA | Zip Code: 95814

Purpose of Disbursement
2002 GENERAL-VOID 8/30/02 CHK.

Candidate Name
JOHN T DOOLITTLE

Category/Type

Office Sought: X House / Senate / President
State: CA District: 04

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
-2000.00

Transaction ID: SB23.10770

B.
Full Name (Last, First, Middle Initial)
JOHN THUNE FOR CONGRESS

Mailing Address
PO BOX 516

City: SIOUX FALLS | State: SD | Zip Code: 57101

Purpose of Disbursement
2002 GENERAL

Candidate Name
JOHN R THUNE

Category/Type

Office Sought: X House / Senate / President
State: SD District: 00

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 23 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10723

C.
Full Name (Last, First, Middle Initial)
KAY GRANGER CAMPAIGN FUND

Mailing Address
910 HOUSTON STREET

City: FORT WORTH | State: TX | Zip Code: 76102

Purpose of Disbursement
2002 GENERAL

Candidate Name
KAY GRANGER

Category/Type

Office Sought: X House / Senate / President
State: TX District: 12

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
1500.00

Transaction ID: SB23.10741

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KOLBE 2002
Mailing Address: PO BOX 31568
City: TUCSON State: AZ Zip Code: 85751
Purpose of Disbursement: 2002 GENERAL
Candidate Name: JAMES T KOLBE
Category/Type
Office Sought: X House / Senate / President
State: AZ District: 06
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 23 / 2002
Amount of Each Disbursement this Period: 2000.00
Transaction ID: SB23.10721

B.
Full Name (Last, First, Middle Initial): KOLBE 2002
Mailing Address: PO BOX 31568
City: TUCSON State: AZ Zip Code: 85751
Purpose of Disbursement: 2002 GENERAL
Candidate Name: JAMES T KOLBE
Category/Type
Office Sought: X House / Senate / President
State: AZ District: 06
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 28 / 2002
Amount of Each Disbursement this Period: 3000.00
Transaction ID: SB23.10750

C.
Full Name (Last, First, Middle Initial): MAC COLLINS FOR CONGRESS
Mailing Address: PO BOX 35
City: JONESBORO State: GA Zip Code: 30237
Purpose of Disbursement: 2002 GENERAL
Candidate Name: MICHAEL A COLLINS
Category/Type
Office Sought: X House / Senate / President
State: GA District: 08
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 24 / 2002
Amount of Each Disbursement this Period: 4000.00
Transaction ID: SB23.10729

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **9000.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
MCCRERY FOR CONGRESS

Mailing Address
1600 DEPOSIT GUARANTY TOWER
City: SHREVEPORT State: LA Zip Code: 71101

Purpose of Disbursement
2002 GENERAL

Candidate Name
JAMES O III MCCRERY

Category/Type

Office Sought: X House / Senate / President
State: LA District: 04

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 28 / 2002

Amount of Each Disbursement this Period
2500.00

Transaction ID: SB23.10757

B.
Full Name (Last, First, Middle Initial)
NAPOLITANO FOR CONGRESS

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL

Candidate Name
GRACE NAPOLITANO

Category/Type

Office Sought: X House / Senate / President
State: CA District: 38

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
1500.00

Transaction ID: SB23.10769

C.
Full Name (Last, First, Middle Initial)
NAPOLITANO FOR CONGRESS

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL-VOID 8/30/02 CHK

Candidate Name
GRACE NAPOLITANO

Category/Type

Office Sought: X House / Senate / President
State: CA District: 38

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
-1500.00

Transaction ID: SB23.10775

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NATHAN DEAL FOR CONGRESS
Mailing Address: PO BOX 902
City: GAINESVILLE State: GA Zip Code: 30503
Purpose of Disbursement: 2002 GENERAL
Candidate Name: NATHAN DEAL
Category/Type
Office Sought: X House / Senate / President
State: GA District: 09
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 28 / 2002
Amount of Each Disbursement this Period: 5000.00
Transaction ID: SB23.10753

B.
Full Name (Last, First, Middle Initial): NORWOOD FOR CONGRESS
Mailing Address: PO BOX 499
City: EVANS State: GA Zip Code: 30809
Purpose of Disbursement: 2002 GENERAL
Candidate Name: CHARLES WHITLOW NORWOOD
Category/Type
Office Sought: X House / Senate / President
State: GA District: 10
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 24 / 2002
Amount of Each Disbursement this Period: 5000.00
Transaction ID: SB23.10731

C.
Full Name (Last, First, Middle Initial): PENNSYLVANIANS FOR KANJORSKI
Mailing Address: 103 SOUTH HANOVER STREET
City: NANTICOKE State: PA Zip Code: 18634
Purpose of Disbursement: 2002 GENERAL-VOID 9/25/02 CHK
Candidate Name: PAUL E KANJORSKI
Category/Type
Office Sought: X House / Senate / President
State: PA District: 11
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 29 / 2002
Amount of Each Disbursement this Period: -2500.00
Transaction ID: SB23.10762

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7500.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
PEOPLE FOR JUANITA MILLENDER-MCDONALD

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL

Candidate Name
JUANITA MILLENDER-MCDONALD

Category/Type

Office Sought: X House / Senate / President
State: CA District: 37

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 29 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10768

B.
Full Name (Last, First, Middle Initial)
PEOPLE FOR JUANITA MILLENDER-MCDONALD

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL-VOID 8/30/02 CHK.

Candidate Name
JUANITA MILLENDER-MCDONALD

Category/Type

Office Sought: X House / Senate / President
State: CA District: 37

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 29 2002

Amount of Each Disbursement this Period
-1000.00

Transaction ID: SB23.10774

C.
Full Name (Last, First, Middle Initial)
PETE SESSIONS FOR CONGRESS

Mailing Address
PO BOX 38585
City: DALLAS State: TX Zip Code: 75238

Purpose of Disbursement
2002 GENERAL

Candidate Name
PETE SESSIONS

Category/Type

Office Sought: X House / Senate / President
State: TX District: 05

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 24 2002

Amount of Each Disbursement this Period
2500.00

Transaction ID: SB23.10747

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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)
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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
PORTER FOR CONGRESS

Mailing Address
6905 PONY CIR
City: LAS VEGAS State: NV Zip Code: 89145

Purpose of Disbursement
2002 GENERAL

Candidate Name
JON PORTER

Category/Type

Office Sought: X House / Senate / President
State: NV District: 03

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
5000.00

Transaction ID: SB23.10735

B.
Full Name (Last, First, Middle Initial)
SCHIFF FOR CONGRESS

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL

Candidate Name
ADAM SCHIFF

Category/Type

Office Sought: X House / Senate / President
State: CA District: 27

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
2000.00

Transaction ID: SB23.10767

C.
Full Name (Last, First, Middle Initial)
SCHIFF FOR CONGRESS

Mailing Address
555 CAPITOL MALL
City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement
2002 GENERAL-VOID 8/30/02-CHK.

Candidate Name
ADAM SCHIFF

Category/Type

Office Sought: X House / Senate / President
State: CA District: 27

Disbursement For: 2002 / Primary / X General / Other (specify)

Date of Disbursement
10 / 29 / 2002

Amount of Each Disbursement this Period
-2000.00

Transaction ID: SB23.10773

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

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)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): TERRELL FOR SENATE
Mailing Address: PO BOX 44298
City: BATON ROUGE State: LA Zip Code: 70894
Purpose of Disbursement: 2002 GENERAL RUNOFF
Candidate Name: SUZANNE TERRELL
Category/Type
Office Sought: House / X Senate / President
State: LA District:
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 11 / 21 / 2002
Amount of Each Disbursement this Period: 5000.00
Transaction ID: SB23.10782

B.
Full Name (Last, First, Middle Initial): TEXANS FOR HENRY BONILLA
Mailing Address: PO BOX 17292
City: SAN ANTONIO State: TX Zip Code: 78217
Purpose of Disbursement: 2002 GENERAL
Candidate Name: HENRY BONILLA
Category/Type
Office Sought: X House / Senate / President
State: TX District: 23
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 24 / 2002
Amount of Each Disbursement this Period: 1000.00
Transaction ID: SB23.10746

C.
Full Name (Last, First, Middle Initial): TEXANS FOR LAMAR SMITH
Mailing Address: 5701 Broadway Ste 104
City: San Antonio State: TX Zip Code: 78209
Purpose of Disbursement: 2002 GENERAL
Candidate Name: LAMAR SEELIGSON SMITH
Category/Type
Office Sought: X House / Senate / President
State: TX District: 21
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 10 / 24 / 2002
Amount of Each Disbursement this Period: 500.00
Transaction ID: SB23.10745

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6500.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
THORNBERRY FOR CONGRESS

Mailing Address
PO BOX 9392
City: AMARILLO State: TX Zip Code: 79105

Purpose of Disbursement
2002 GENERAL

Candidate Name
WILLIAM M (MAC) THORNBERRY

Category/Type

Office Sought: X House / Senate / President
State: TX District: 13

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 24 / 2002

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.10742

B.
Full Name (Last, First, Middle Initial)
WILLIAM L BILL JENKINS FOR CONGRESS

Mailing Address
767 MCKINNEY CHAPEL RD PO BOX 640
City: ROGERSVILLE State: TN Zip Code: 37857

Purpose of Disbursement
2002 GENERAL

Candidate Name
WILLIAM L 'BILL' JENKINS

Category/Type

Office Sought: X House / Senate / President
State: TN District: 01

Disbursement For: 2002
Primary / X General / Other (specify)

Date of Disbursement
10 / 31 / 2002

Amount of Each Disbursement this Period
3000.00

Transaction ID: SB23.10754

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

TOTAL This Period (last page this line number only) ..... ▶ **94000.00**

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

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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
AMA POLITICAL EDUCATION FUND

Mailing Address
1101 VERMONT AVENUE NW

City: WASHINGTON
State: DC
Zip Code: 20005

Purpose of Disbursement
TRANSFER FUNDS DEPOSITED INCORRECTLY

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
11 08 2002

Amount of Each Disbursement this Period
50.00

Transaction ID: SB29.10778

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**50.00**
TOTAL This Period (last page this line number only) ..... ▶	**50.00**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE	C00000422

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
FAIRBANK MASLIN MAULLIN & ASSOCIATES	POLL	

Mailing Address: 2425 COLORADO AVENUE

City: SANTA MONCIA | State: CA | Zip Code: 90404

Date: 10 23 2002 | Amount: 16000.00

Transaction ID: SE24.10600

Name of Federal Candidate supported or opposed by expenditure: DENNIS MR CARDOZA

Office Sought: X House / Senate / Presidential

State: CA District: 18

Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
LAGUENS HAMBURGER STONE	TV	

Mailing Address: 4301 CONNECTICUT AVENUE NW

City: WASHINGTON | State: DC | Zip Code: 20008

Date: 11 18 2002 | Amount: 11980.45

Transaction ID: SE24.10631

Name of Federal Candidate supported or opposed by expenditure: DENNIS MR CARDOZA

Office Sought: X House / Senate / Presidential

State: CA District: 18

Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
MEDIA STRATEGIES RESEARCH	TV	

Mailing Address: 318 MASSACHUSETTS AVENUE NE

City: WASHINGTON | State: DC | Zip Code: 20002

Date: 10 24 2002 | Amount: 150000.00

Transaction ID: SE24.10606

Name of Federal Candidate supported or opposed by expenditure: DENNIS MR CARDOZA

Office Sought: X House / Senate / Presidential

State: CA District: 18

Check One: X Support / Oppose

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **177980.45**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ **0.00**

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury, I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Date M M D D Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE	C00000422

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
NATIONAL MEDIA	TV	
Mailing Address: 815 SLATERS LANE	Name of Federal Candidate supported or opposed by expenditure: A WAYNE ALLARD	
City: ALEXANDRIA State: VA Zip Code: 22314	Office Sought: House / X Senate / Presidential	
Date: 10 23 2002 Amount: 38000.00	State: CO District: 00	
Transaction ID: SE24.10595	Check One: X Support / Oppose	

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
NATIONAL MEDIA	RADIO	
Mailing Address: 815 SLATERS LANE	Name of Federal Candidate supported or opposed by expenditure: SHELLEY MOORE CAPITO	
City: ALEXANDRIA State: VA Zip Code: 22314	Office Sought: X House / Senate / Presidential	
Date: 10 24 2002 Amount: 3749.00	State: WV District: 02	
Transaction ID: SE24.10602	Check One: X Support / Oppose	

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
NATIONAL MEDIA	TV	
Mailing Address: 815 SLATERS LANE	Name of Federal Candidate supported or opposed by expenditure: A WAYNE ALLARD	
City: ALEXANDRIA State: VA Zip Code: 22314	Office Sought: House / X Senate / Presidential	
Date: 10 24 2002 Amount: 11321.75	State: CO District: 00	
Transaction ID: SE24.10603	Check One: X Support / Oppose	

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **53070.75**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ **0.00**

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury, I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Date M M D D Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE	C00000422

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
NATIONAL MEDIA	TV	
Mailing Address: 815 SLATERS LANE	Name of Federal Candidate supported or opposed by expenditure: A WAYNE ALLARD	
City: ALEXANDRIA; State: VA; Zip Code: 22314	Office Sought: House / X Senate / Presidential	
Date: 10 30 2002; Amount: 47500.00	State: CO District: 00	
Transaction ID: SE24.10625	Check One: X Support / Oppose	

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
STEVENS REED CURCIO & COMPANY	RADIO	
Mailing Address: 201 NORTH UNION STREET SUITE 400	Name of Federal Candidate supported or opposed by expenditure: J PHILLIP MD GINGREY	
City: ALEXANDRIA; State: VA; Zip Code: 22314	Office Sought: X House / Senate / Presidential	
Date: 10 24 2002; Amount: 135000.00	State: GA District: 11	
Transaction ID: SE24.10604	Check One: X Support / Oppose	

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
STEVENS REED CURCIO & COMPANY	OVERPAYMENT-TV/RADIO	
Mailing Address: 201 NORTH UNION STREET SUITE 400	Name of Federal Candidate supported or opposed by expenditure: GREG GANSKE	
City: ALEXANDRIA; State: VA; Zip Code: 22314	Office Sought: House / X Senate / Presidential	
Date: 10 24 2002; Amount: -25211.00	State: IA District: 00	
Transaction ID: SE24.10611	Check One: X Support / Oppose	

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **157289.00**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ **0.00**

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury, I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Date M M D D Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

FEC IDENTIFICATION NUMBER
C00000422

Full Name (Last, First, Middle, Initial) of Payee
STEVENS REED CURCIO & COMPANY

Mailing Address
201 NORTH UNION STREET SUITE 400

City: ALEXANDRIA State: VA Zip Code: 22314

Date: M M 10 D D 24 Y Y Y Y 2002

Amount: -30539.00

Transaction ID: SE24.10612

Purpose of Expenditure: OVERPAYMENT-RADIO

Category/Type

Name of Federal Candidate supported or opposed by expenditure:
J PHILLIP MD GINGREY

Office Sought: X House / Senate / Presidential

State: GA District: 11

Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee
STEVENS REED CURCIO & COMPANY

Mailing Address
201 NORTH UNION STREET SUITE 400

City: ALEXANDRIA State: VA Zip Code: 22314

Date: M M 10 D D 25 Y Y Y Y 2002

Amount: 100750.00

Transaction ID: SE24.10613

Purpose of Expenditure: RADIO

Category/Type

Name of Federal Candidate supported or opposed by expenditure:
GREG GANSKE

Office Sought: House / X Senate / Presidential

State: IA District: 00

Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee
STEVENS REED CURCIO & COMPANY

Mailing Address
201 NORTH UNION STREET SUITE 400

City: ALEXANDRIA State: VA Zip Code: 22314

Date: M M 10 D D 29 Y Y Y Y 2002

Amount: 25000.00

Transaction ID: SE24.10618

Purpose of Expenditure: MEDIA

Category/Type

Name of Federal Candidate supported or opposed by expenditure:
GREG GANSKE

Office Sought: House / X Senate / Presidential

State: IA District: 00

Check One: X Support / Oppose

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **95211.00**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ **0.00**

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury I certify that no coordinated expenditures contained herein were made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Signature

Date M M D D Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE	C00000422

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
STEVENS REED CURCIO & COMPANY	RADIO	
Mailing Address: 201 NORTH UNION STREET SUITE 400	Name of Federal Candidate supported or opposed by expenditure: GREG GANSKE	
City: ALEXANDRIA State: VA Zip Code: 22314	Office Sought: House / X Senate / Presidential	
Date: 10 29 2002 Amount: 1385.31	State: IA District: 00	
Transaction ID: SE24.10619	Check One: X Support Oppose	

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
STEVENS REED CURCIO & COMPANY	RADIO	
Mailing Address: 201 NORTH UNION STREET SUITE 400	Name of Federal Candidate supported or opposed by expenditure: J PHILLIP MD GINGREY	
City: ALEXANDRIA State: VA Zip Code: 22314	Office Sought: X House / Senate / Presidential	
Date: 10 29 2002 Amount: 141.88	State: GA District: 11	
Transaction ID: SE24.10620	Check One: X Support Oppose	

Full Name (Last, First, Middle, Initial) of Payee	Purpose of Expenditure	Category/ Type
STEVENS REED CURCIO & COMPANY	RADIO	
Mailing Address: 201 NORTH UNION STREET SUITE 400	Name of Federal Candidate supported or opposed by expenditure: SUZANNE TERRELL	
City: ALEXANDRIA State: VA Zip Code: 22314	Office Sought: House / X Senate / Presidential	
Date: 11 25 2002 Amount: 83000.00	State: LA District:	
Transaction ID: SE24.10633	Check One: X Support Oppose	

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **84527.19**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ **0.00**

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury, I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Signature _____ Date M M D D Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

FEC IDENTIFICATION NUMBER
C00000422

Full Name (Last, First, Middle, Initial) of Payee
STEVENS REED CURCIO & COMPANY

Mailing Address
201 NORTH UNION STREET SUITE 400

City: ALEXANDRIA
State: VA
Zip Code: 22314

Date: M M 11 D D 25 Y Y Y Y 2002

Amount: -12860.00

Transaction ID: SE24.10635

Purpose of Expenditure
MEDIA OVERPAYMENT

Category/ Type

Name of Federal Candidate supported or opposed by expenditure:
GREG GANSKE

Office Sought: House / X Senate / Presidential

State: IA District: 00

Check One: X Support / Oppose

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ -12860.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶ 0.00

(c) **TOTAL** Independent Expenditures ..... ▶ 555218.39

Under penalty of perjury, I certify that no coordination expenditures contained herein were made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee.

Signature

Date M M D D Y Y Y Y