REPORT OF RECEIPTS AND DISBURSEMENTS

(01/31/2000 18:40)

For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)
National Association of Portable X-ray Providers Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
2111 Wilson Boulevard, Suite 600
2111 Wilson Boulevard, Suite 600

2. FEC IDENTIFICATION NUMBER
C00347658

CITY, STATE, and ZIP CODE
Arlington VA 22201-

3. ☐ This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year End Report

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

☐ Termination report

Monthly Report Due On:

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

☐ Twelfth day report preceding _____ (election type)
election on 01/01/1999 in the State of VA

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

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

SUMMARY 5. Covering Period 07/01/1999 through 12/31/1999	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand, January 1, 1999		0.00
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from line 19)	8660.00	8660.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8660.00	8660.00
7. Total Disbursements (from line 30)	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8660.00	8660.00
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	

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer
Kenneth Harris

Signature of Treasurer

Date
01/31/2000

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

FEC FORM 3X
(revised 9/93)

4-00173

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

(revised 1/1/91)

NAME OF COMMITTEE
National Association of Portable X-ray Providers Political Action Committee

REPORT COVERING PERIOD
FROM 07/01/1999 TO: 12/31/1999

I. Receipts

	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	8660.00	8660.00	11.a.i.
ii. Unitemized	0.00	0.00	11.a.ii.
iii. Total (add i and ii)»	8660.00	8660.00	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions (add a iii, b and c)»	8660.00	8660.00	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)»	8660.00	8660.00	19.
20. Total Federal Receipts (subtract line 18 from line 19)»	8660.00	8660.00	20.

II. Disbursements

21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	0.00	21.b.
c. Total Operating Expenditures (add a i, a ii, and b)»	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds (add a, b, and c)»	0.00	0.00	28.d.
29. Other Disbursements	0.00	0.00	29.
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)»	0.00	0.00	30.
31. Total Federal Disbursements (subtract line 21 a ii from line 30)»	0.00	0.00	31.

III. Net Contributions / Operating Expenditures

32. Total Contributions (other than loans) (from line 11d)	8660.00	8660.00	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	8660.00	8660.00	34.
35. Total Federal Operating Expenditures (add 21 a i and 21 b)»	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures (subtract line 36 from 35)»	0.00	0.00	37.

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11A1

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)
National Association of Portable X-ray Providers Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Andrews 8780 Morehouse Flats Road Jamesville NY 13078- Receipt For: Primary General Other (specify):	K&A Services Occupation: President/Owner Aggregate Year-to-Date > $ 500.00	10/29/1999	500.00
Jerry Armstrong 9508 RT 250 N Milan OH 44846- Receipt For: Primary General Other (specify):	Porta-Med Inc. Occupation: R.T. Aggregate Year-to-Date > $ 100.00	11/09/1999	100.00
Ballik Benjamin 11057 Weddington Street North Hollywood CA 91601- Receipt For: Primary General Other (specify):	MDX - Medical Diagnosis Occupation: Mobil X-Ray Aggregate Year-to-Date > $ 1000.00	10/26/1999	1000.00
Elizabeth Borgert 9601 East Danforth Road Arcadia OK 73007- Receipt For: Primary General Other (specify):	Diagnostic Mobile X-Ray Occupation: Administrator Aggregate Year-to-Date > $ 200.00	10/15/1999	200.00
Jerome Borgert 9601 East Danforth Road Arcadia OK 73007- Receipt For: Primary General Other (specify):	Diagnostic Mobile X-Ray Occupation: Owner Aggregate Year-to-Date > $ 200.00	10/15/1999	200.00
Fredric Brotz 4 Lucerne Court Cherry Hill NJ 08003- Receipt For: Primary General Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 250.00	12/28/1999	250.00
John Broussard 8307 Long Canyon Drive Austin TX 78730- Receipt For: Primary General Other (specify):	Mobil X-ray of Austin Occupation: X-Ray Technician Aggregate Year-to-Date > $ 600.00	10/15/1999	600.00

SUBTOTALS of Receipts This Page (Optional) .....

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

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National Association of Portable X-ray Providers Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Bucci 4505 River Road Toledo OH 43614-	The Bucci Group, Ltd.	10/12/1999	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Owner Aggregate Year-to-Date > $ 100.00		
Mike Calcuti 6121 Excelsior Boulevard Suite 107 Minneapolis MN 55416-	Portable X-Ray & EKG Inc.	10/20/1999	150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: CEO Aggregate Year-to-Date > $ 150.00		
Velda Crouse 801 Maple Street San Mateo CA 94402-	Home Portable X-Ray	10/15/1999	200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Mobile X-Ray & EKG Provider Aggregate Year-to-Date > $ 200.00		
Lala Davis 2988 E. 77th Place Tulsa OK 74136-	Contract X-Ray Service, Inc.	10/15/1999	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Portable X-Ray Provider Aggregate Year-to-Date > $ 500.00		
Leo Eisenberg 816 Bates Street Birmingham MI 48009-	The Nursing Home Group	11/10/1999	1000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Executive Aggregate Year-to-Date > $ 1000.00		
Norman Goldhechl 37 Eagle Road Marlboro NJ 07746-	self	11/30/1999	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date > $ 250.00		
Jan Gurr 5510 Round-up Street Boise ID 83709-	Boise State University	11/23/1999	200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Biological Technician Aggregate Year-to-Date > $ 200.00		

SUBTOTALS of Receipts This Page (Optional) .....

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

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National Association of Portable X-ray Providers Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Harris 15307 Fallen Grove San Antonio TX 78247-	Advanced Imaging Svcs.	10/15/1999	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation: Division Director		
	Aggregate Year-to-Date > $ 100.00		
Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Knolwes 11703 36 Avenue W Bradenton FL 34210-		10/15/1999	200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation: Housewife		
	Aggregate Year-to-Date > $ 200.00		
Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Knowles 11703 36 Avenue W Bradenton FL 34210-	Knowles' Mobile Diagnostics	10/15/1999	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation: Portable X-Ray		
	Aggregate Year-to-Date > $ 100.00		
Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Geraldine Mock 1715 N.E. 160th Seattle WA 98155-	Mobile Radiology & Imaging	10/14/1999	10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation: X-Ray Technologist		
	Aggregate Year-to-Date > $ 10.00		
Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jackie Moore 462 Regency Boulevard Shreveport LA 71106-	Mobile X-Ray of Shreveport	10/18/1999	200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation: X-Ray Tech/Owner		
	Aggregate Year-to-Date > $ 200.00		
Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Nelson 1003 W. 35th Street Davenport IA 52806-	Nelson Mobile X-Ray, Inc.	11/16/1999	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation		
	Aggregate Year-to-Date > $ 250.00		
Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Precopio 5520 Maple Heights Road Excelsior MN 55331-	Portable X-Ray & EKG Inc.	10/15/1999	150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Occupation: President		
	Aggregate Year-to-Date > $ 150.00		

SUBTOTALS of Receipts This Page (Optional) .....

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

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National Association of Portable X-ray Providers Political Action Committee

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ira Schatiman 250 Dolphin Drive Woodmere NY 11598-1816 Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Rapid Portable X-Ray Service Occupation: Executive Aggregate Year-to-Date $ 250.00	10/16/1999	250.00
Neil Schneider 9802 Mercerwood Drive Mercer Island WA 98040- Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Mobile Radiology & Imaging Occupation: Radiologist Aggregate Year-to-Date $ 500.00	10/15/1999	500.00
Sari Rose Schneider 9802 Mercerwood Drive Mercer Island WA 98040- Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Mobile Radiology & Imaging Occupation: Business Manager Aggregate Year-to-Date $ 500.00	10/15/1999	500.00
Sarajean Shakosky 1096 Carrousel Drive East Reynoldsburg OH 43068- Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Bedside X-Ray & EKG Occupation: CEO Aggregate Year-to-Date $ 300.00	10/15/1999	300.00
Michael Streack 295 Troy Del Way Buffalo NY 14221- Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Buffalo Ultrasound Occupation: President Aggregate Year-to-Date $ 100.00	10/14/1999	100.00
Jeff Todd 907 Mesa Street Morro Bay CA 93442- Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	San Luis Portable X-Ray & EKG Occupation: Radiographer Aggregate Year-to-Date $ 250.00	11/10/1999	250.00
Tom Wuerstle 5491 Wales Road Erie PA 16510- Receipt For: ☐ Primary ☐ General ☐ Other (specify) :	Diagnostic X-Ray Services, Inc Occupation: Aggregate Year-to-Date $ 500.00	10/15/1999	500.00

SUBTOTALS of Receipts This Page (Optional) .....

TOTALS This Period (last page this line number only) **8650.00**

20 03 15 15 13 19

SCHEDULE H1
(revised 5/93)

METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS

NAME OF COMMITTEE (in Full)
National Association of Portable X-ray Providers Political Action Committee

NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX) ..... 65.00 %

- ☐ PRESIDENTIAL YEAR (65%)
- ☐ ALL OTHER YEARS (60%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

☐ **MINIMUM FEDERAL PERCENTAGE** (65%) (IF CHECKED, ENTER % IN BOX) ..... 00.00 %

OR

☐ **FUNDS EXPENDED :** ..... 00.00 %

ESTIMATED DIRECT CANDIDATE SUPPORT - FEDERAL
ESTIMATED DIRECT CANDIDATE SUPPORT - NON-FEDERAL ..... 00.00 %

ADJUSTMENTS TO FUNDS EXPENDED: ..... 00.00 %
ACTUAL DIRECT CANDIDATE SUPPORT - FEDERAL ..... $ 0.00
ACTUAL DIRECT CANDIDATE SUPPORT - NON-FEDERAL ..... $ 0.00

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED : ..... 00.00 %

ESTIMATED DIRECT CANDIDATE SUPPORT - FEDERAL
ESTIMATED DIRECT CANDIDATE SUPPORT - NON-FEDERAL ..... 00.00 %

ADJUSTMENTS TO FUNDS EXPENDED: ..... 00.00 %
ACTUAL DIRECT CANDIDATE SUPPORT - FEDERAL ..... $ 0.00
ACTUAL DIRECT CANDIDATE SUPPORT - NON-FEDERAL ..... $ 0.00

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

			POINTS
1.	PRESIDENT	(1 point)	0
2.	U.S. SENATE	(1 point)	0
3.	U.S. CONGRESS	(1 point)	0
4.	SUBTOTAL (FEDERAL) (1 + 2 + 3)		0
5.	GOVERNOR	(1 point)	0
6.	OTHER STATEWIDE OFFICE(S)	(1 or 2 points)	0
7.	STATE SENATE	(1 point)	0
8.	STATE REPRESENTATIVE	(1 point)	0
9.	LOCAL CANDIDATES	(1 or 2 points)	0
10.	EXTRA NON-FEDERAL POINT	(1 point)	0
11.	SUBTOTAL (NON-FEDERAL) (5 + 6 + 7 + 8 + 9 + 10)		0
12.	TOTAL POINTS (4 + 11)		0

FEDERAL ALLOCATION ([(4) / (12)] x 100) ..... %

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify): Electronic Transmission	Postmarked 1-31-00 and/or Date of Receipt
☑	Electronic Filing	

[signature] 2-4-00

PREPARER DATE PREPARED

(4/98)

20 03 519 1821