01/21/2004 13 : 26

# 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

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE: THE (STS PAC)

ADDRESS (number and street) ▼ 2025 M Street, N.W.

Suite 800

Check if different than previously reported. (ACC)

WASHINGTON | DC | 20036 -

2. **FEC IDENTIFICATION NUMBER** ▼ C00325936

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT — X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- X January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

| | | | |
|---|---|---|---|
| Feb 20 (M2) | May 20 (M5) | Aug 20 (M8) | Nov 20 (M11) (Non-Election Year Only) |
| Mar 20 (M3) | Jun 20 (M6) | Sep 20 (M9) | Dec 20 (M12) (Non-Election Year Only) |
| Apr 20 (M4) | Jul 20 (M7) | Oct 20 (M10) | Jan 31 (YE) |

(c) 12-Day **PRE**-Election Report for the: Primary (12P) — General (12G) — Runoff (12R) — Convention (12C) — Special (12G)

Election on _____ in the State of _____

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

Election on _____ in the State of _____

5. Covering Period 07 01 2003 through 12 31 2003

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 Mr. Robert Wilbur

Signature of Treasurer Electronically Filed by Mr. Robert Wilbur Date 01 21 2004

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

| Office Use Only | | | | | | | |
|---|---|---|---|---|---|---|---|

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

# SUMMARY PAGE
## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)



Write or Type Committee Name
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

Report Covering the Period: From: 07 01 2003 To: 12 31 2003

| | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|---|---|
| 6. (a) Cash on Hand January 1 2003 | | 49912.66 |
| (b) Cash on Hand at Begining of Reporting Period ..... | 57012.66 | |
| (c) Total Receipts (from Line 19) ..... | 8400.00 | 89000.00 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) ..... | 65412.66 | 138912.66 |
| 7. Total Disbursements (from Line 31) ..... | 38750.00 | 112250.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ..... | 26662.66 | 26662.66 |
| 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



Write or Type Committee Name

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

Report Covering the Period: From: 07 01 2003 To: 12 31 2003

| 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) ..... | 8300.00 | |
| (ii) Unitemized ..... | 100.00 | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶ | 8400.00 | 89000.00 |
| (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 33, page 5) ..... ▶ | 8400.00 | 89000.00 |
| 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 37, page 5) ..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees ..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) ..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) ..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) ..... | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ..... | 8400.00 | 89000.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) ..... | 8400.00 | 89000.00 |

# DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)



| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶ | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 36750.00 | 112250.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 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 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶ | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 36750.00 | 112250.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31) | 36750.00 | 112250.00 |

# DETAILED SUMMARY PAGE

of Disbursements

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



| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) ..... | 8400.00 | 89000.00 |
| 34. Total Contribution Refunds (from Line 28(d)) ..... | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... | 8400.00 | 89000.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) ..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... | 0.00 | 0.00 |

## SCHEDULE A (FEC Form 3X)
## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 20
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial)
Charles Antinori M.D.
Mailing Address 7201 Bishops View Circle
City: Cherry Hill State: NJ Zip Code: 08002
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 24 2003
Transaction ID: SA11A1.5959
Amount of Each Receipt this Period: 250.00

**B.**
Full Name (Last, First, Middle Initial)
Joseph Bavaria, M.D.
Mailing Address 3400 Spruce Street 4th Floor
City: Philadelphia State: PA Zip Code: 19104
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 14 2003
Transaction ID: SA11A1.5960
Amount of Each Receipt this Period: 500.00

**C.**
Full Name (Last, First, Middle Initial)
Charles Benoit, M.D.
Mailing Address 27 Beth Ellen Drive
City: Lewisburg State: PA Zip Code: 17837
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 11 02 2003
Transaction ID: SA11A1.5961
Amount of Each Receipt this Period: 1000.00

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: PAGE 7 / 20
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial)
Michael Butler, M.D.
Mailing Address 5127 Ridgedale Drive
City: Erie State: PA Zip Code: 31045
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 27 2003
Transaction ID: SA11A1.5962
Amount of Each Receipt this Period: 500.00

**B.**
Full Name (Last, First, Middle Initial)
Dr. William Deschner
Mailing Address 791D W. Jefferson Blvd. Suite 1D2
City: Fort Wayne State: IN Zip Code: 46804-4159
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 08 04 2003
Transaction ID: SA11A1.5963
Amount of Each Receipt this Period: 600.00

**C.**
Full Name (Last, First, Middle Initial)
Dr. Robert Gustafson
Mailing Address 2012 Pinecrest Drive
City: Morgantown State: WV Zip Code: 26505-6031
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 04 2003
Transaction ID: SA11A1.5965
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1350.00

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

## SCHEDULE A (FEC Form 3X)
## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 20
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial)
Dr. Joseph Ladowski
Mailing Address 791 D W. Jefferson Blvd.
Suite 102
City: Fort Wayne State: IN Zip Code: 46804-4159
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 08 04 2003
Transaction ID: SA11A1.5967
Amount of Each Receipt this Period: 600.00

**B.**
Full Name (Last, First, Middle Initial)
Dr. Michael Mauney
Mailing Address 3 Daniel Road
City: St. Louis State: MO Zip Code: 63124
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 04 2003
Transaction ID: SA11A1.5969
Amount of Each Receipt this Period: 500.00

**C.**
Full Name (Last, First, Middle Initial)
Dr. Alan Peterson
Mailing Address 791 D W. Jefferson Blvd.
Suite 102
City: Fort Wayne State: IN Zip Code: 46804-4159
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 08 04 2003
Transaction ID: SA11A1.5971
Amount of Each Receipt this Period: 600.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1700.00**

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

# SCHEDULE A (FEC Form 3X)
## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 20
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial)
Veera Perapaboon, M.D.
Mailing Address 480 Scarborough Rd
City: Valparaiso State: IN Zip Code: 46385
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 16 2003
Transaction ID: SA11A1.5973
Amount of Each Receipt this Period: 500.00

**B.**
Full Name (Last, First, Middle Initial)
Dr. Adam Raney
Mailing Address 3333 W. Coast Highway Suite 500
City: Newport Beach State: CA Zip Code: 92663
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 27 2003
Transaction ID: SA11A1.5974
Amount of Each Receipt this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial)
Dr. Javid Saiff
Mailing Address 4033 Windsor Drive
City: Niskayuna State: NY Zip Code: 12309-6701
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 23 2003
Transaction ID: SA11A1.5976
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2500.00

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

## SCHEDULE A (FEC Form 3X)
## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 20
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

A. Full Name (Last, First, Middle Initial)
Dr. Douglas Zusman

Mailing Address 3333 W. Coast Highway
Suite 500

City: Newport Beach
State: CA
Zip Code: 92663

FEC ID number of contributing federal political committee: C

Name of Employer: self
Occupation: physician

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 27 2003

Transaction ID: SA11A1.5980

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1000.00

TOTAL This Period (last page this line number only) ..... ▶ 8300.00

# 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 [x] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): AMERICA'S MAJORITY TRUST
Mailing Address: 1155 21st Street NW, Suite 300
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: OH District: 2
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6020
Date of Disbursement: 10/27/2003
Amount of Each Disbursement this Period: 1000.00

**B.**
Full Name (Last, First, Middle Initial): ARMPAC
Mailing Address: P.O. Box 5804
City: Arlington State: VA Zip Code: 22205
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6023
Date of Disbursement: 11/25/2003
Amount of Each Disbursement this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial): BILLY TAUZIN COMMITTEE
Mailing Address: P.O. Box 2268
City: Houma State: LA Zip Code: 70361
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: LA District: 03
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5991
Date of Disbursement: 09/08/2003
Amount of Each Disbursement this Period: 2000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): BOYD FOR CONGRESS
Mailing Address: P.O. Box 15703
P.O. Box 15703
City: Tallahassee State: FL Zip Code: 32317
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: FL District: 02
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6001
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**B.**
Full Name (Last, First, Middle Initial): CANTOR FOR CONGRESS
Mailing Address: P. O. Box 17813
City: Richmond State: VA Zip Code: 23226
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: VA District: 07
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5984
Date of Disbursement: 07 / 21 / 2003
Amount of Each Disbursement this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial): CITIZENS FOR ARLEN SPECTER
Mailing Address: 428 C STREET NE
CARRIAGE HOUSE
City: WASHINGTON State: DC Zip Code: 20002
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: PA District: 00
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5995
Date of Disbursement: 09 / 29 / 2003
Amount of Each Disbursement this Period: 4500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 6000.00

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 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): CONGRESSMAN BART GORDON COMMITTEE
Mailing Address: P.O. Box 2008
City: Murfreesboro State: TN Zip Code: 37133
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: TN District: 06
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6003
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**B.**
Full Name (Last, First, Middle Initial): EARL POMEROY FOR CONGRESS
Mailing Address: PO Box 746
City: Bismarck State: ND Zip Code: 58502
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: ND District: 00
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6005
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**C.**
Full Name (Last, First, Middle Initial): FRIENDS OF BUD CRAMER
Mailing Address: P.O. Box 2621
City: Huntsville State: AL Zip Code: 35804
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: AL District: 05
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6007
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1500.00**

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 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): FRIENDS OF CONGRESSMAN TIM HOLDEN
Mailing Address: 18 N. SECOND STREET PO BOX 37
PO BOX 37
City: SAINT CLAIR State: PA Zip Code: 17970
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: PA District: 17
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6009
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**B.**
Full Name (Last, First, Middle Initial): FRIENDS OF DENNIS CARDOZA
Mailing Address: 555 Capitol Mall Suite 1425
City: Sacramento State: CA Zip Code: 95814
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: CA District: 18
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6011
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**C.**
Full Name (Last, First, Middle Initial): FRIENDS OF ROY BLUNT
Mailing Address: PO Box 50100
PO Box 50100
City: Springfield State: MO Zip Code: 65805
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: MO District: 07
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5996
Date of Disbursement: 09 / 29 / 2003
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3500.00

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 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): FRIENDS OF SHERROD BROWN
Mailing Address: 607 14TH STREET NW SUITE 800
City: WASHINGTON State: DC Zip Code: 20005
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: OH District: 13
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5989
Date of Disbursement: 08 / 04 / 2003
Amount of Each Disbursement this Period: 1000.00

**B.**
Full Name (Last, First, Middle Initial): HALL FOR CONGRESS COMMITTEE
Mailing Address: POST OFFICE BOX 711
City: ROCKWALL State: TX Zip Code: 75087
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: TX District: 04
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6019
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial): THE HAWKEYE PAC
Mailing Address: PO BOX 7255
City: DES MOINES State: IA Zip Code: 50309
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6028
Date of Disbursement: 12 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): HUMPHREYS FOR SENATE INC
Mailing Address: PO BOX 16366
City: OKLAHOMA CITY State: OK Zip Code: 73113
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: OK District: 00
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6030
Date of Disbursement: 12 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

**B.**
Full Name (Last, First, Middle Initial): JOHN SHADEGG FOR CONGRESS
Mailing Address: P O BOX 45444
City: PHOENIX State: AZ Zip Code: 85064
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: AZ District: 04
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5988
Date of Disbursement: 08 / 04 / 2003
Amount of Each Disbursement this Period: 2000.00

**C.**
Full Name (Last, First, Middle Initial): LATHAM FOR CONGRESS
Mailing Address: PO Box 71
PO BOX 71
City: Clarion State: IA Zip Code: 50525
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: IA District: 04
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6027
Date of Disbursement: 12 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): LEE PAC
Mailing Address: 4451 BROOKFIELD CORP DR #200
City: CHANTILLY State: VA Zip Code: 20151
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: CT District: 5
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6024
Date of Disbursement: 12 / 08 / 2003
Amount of Each Disbursement this Period: 1000.00

**B.**
Full Name (Last, First, Middle Initial): LUCAS FOR CONGRESS
Mailing Address: P.O. Box 17344
City: Covington State: KY Zip Code: 41017
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: KY District: 4
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6013
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**C.**
Full Name (Last, First, Middle Initial): MATHESON FOR CONGRESS
Mailing Address: 677 South 200 West Suite A
City: Salt Lake City State: UT Zip Code: 84101
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: UT District: 02
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6015
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

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 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): NORWOOD FOR CONGRESS
Mailing Address: P O BOX 499
City: EVANS State: GA Zip Code: 30809
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: GA District: 10
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5998
Date of Disbursement: 09 / 29 / 2003
Amount of Each Disbursement this Period: 2000.00

**B.**
Full Name (Last, First, Middle Initial): PRYCE PROJECT
Mailing Address: 1200 Trinity Drive
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: OH District: 15
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5994
Date of Disbursement: 09 / 12 / 2003
Amount of Each Disbursement this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial): RICHARD BURR COMMITTEE
Mailing Address: PO BOX 5928
City: WINSTON-SALEM State: NC Zip Code: 27113
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5990
Date of Disbursement: 08 / 28 / 2003
Amount of Each Disbursement this Period: 1000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): RICHARD BURR COMMITTEE
Mailing Address: PO BOX 5928
City: WINSTON-SALEM State: NC Zip Code: 27113
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6022
Date of Disbursement: 11/03/2003
Amount of Each Disbursement this Period: 1000.00

**B.**
Full Name (Last, First, Middle Initial): SAM BROWNBACK FOR U S SENATE
Mailing Address: P.O. BOX 2008
City: TOPEKA State: KS Zip Code: 66601
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: KS District: 00
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5999
Date of Disbursement: 09/29/2003
Amount of Each Disbursement this Period: 250.00

**C.**
Full Name (Last, First, Middle Initial): SENATE MAJORITY FUND
Mailing Address: P.O. Box 32025
City: Phoenix State: AZ Zip Code: 85064
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: AZ District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5982
Date of Disbursement: 07/01/2003
Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4250.00**

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 ☐ 30b



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE; THE (STS PAC)

**A.**
Full Name (Last, First, Middle Initial): STENHOLM FOR CONGRESS COMMITTEE
Mailing Address: P. O. Box 1032
City: Stamford State: TX Zip Code: 79553
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: TX District: 19
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.6017
Date of Disbursement: 10 / 13 / 2003
Amount of Each Disbursement this Period: 500.00

**B.**
Full Name (Last, First, Middle Initial): TIM JOHNSON FOR SOUTH DAKOTA INC
Mailing Address: PO BOX 1859
City: SIOUX FALLS State: SD Zip Code: 57101
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / X Senate / President
State: SD District: 00
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5992
Date of Disbursement: 09 / 08 / 2003
Amount of Each Disbursement this Period: 1000.00

**C.**
Full Name (Last, First, Middle Initial): TOM DELAY CONGRESSIONAL COMMITTEE
Mailing Address: 10707 Corporate Drive Suite 130
City: Stafford State: TX Zip Code: 77477
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: X House / Senate / President
State: TX District: 22
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB23.5986
Date of Disbursement: 07 / 14 / 2003
Amount of Each Disbursement this Period: 5000.00

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6500.00 |
| TOTAL This Period (last page this line number only) ▶ | 38750.00 |