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** — CITY — STATE — ZIPCODE

C00000422

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)
- [ ] 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)	[X] 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 06 01 2006 through 06 30 2006

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 07 12 2006

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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M 06 D D 01 Y Y Y Y 2006 To: M M 06 D D 30 Y Y Y Y 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2006		2046116.92
(b) Cash on Hand at Begining of Reporting Period	2523534.90	
(c) Total Receipts (from Line 19)	122354.69	1247881.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2645889.59	3293998.82
7. Total Disbursements (from Line 31)	182713.27	830822.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2463176.32	2463176.32
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

AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M 06 D D 01 Y Y Y Y 2006 To: M M 06 D D 30 Y Y Y Y 2006

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)	82199.14	921473.82
(ii) Unitemized	29851.52	270697.25
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	112050.66	1192171.07
(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) ..... ▶	112050.66	1192171.07
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	5191.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	10304.03	50519.83
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))	122354.69	1247881.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	122354.69	1247881.90

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	1013.27	7905.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	1013.27	7905.44
22. Transfers to Affiliated/Other Party Committees	300.00	86647.06
23. Contributions to Federal Candidates/Committees and Other Political Committees	181400.00	735350.00
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	220.00
(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	220.00
29. Other Disbursements	0.00	700.00
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))	182713.27	830822.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	182713.27	830822.50

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)	112050.66	1192171.07
34. Total Contribution Refunds (from Line 28(d))	0.00	220.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	112050.66	1191951.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1013.27	7905.44
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	5191.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1013.27	2714.44

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)
[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): KEITH ADAMS, MD
Mailing Address: 416 MUNRO ROAD
City: MILL HALL State: PA Zip Code: 17751
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 03 / 2006
Transaction ID: SA11A1.19139
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): ROBERT BONVINO, MD
Mailing Address: 206 DOE TRAIL
City: MORGANVILLE State: NJ Zip Code: 07751
FEC ID number of contributing federal political committee: C
Name of Employer: NEW YORK UNIVERSITY
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 466.60
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19194
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): ROBERT BONVINO, MD
Mailing Address: 206 DOE TRAIL
City: MORGANVILLE State: NJ Zip Code: 07751
FEC ID number of contributing federal political committee: C
Name of Employer: NEW YORK UNIVERSITY
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 549.92
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19146
Amount of Each Receipt this Period: 83.32

SUBTOTAL of Receipts This Page (optional) ..... ▶ 633.32

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

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

A.
Full Name (Last, First, Middle Initial): RICHARD BOSSHARDT, MD
Mailing Address: 1879 NIGHTINGALE LANE
City: TAVARES State: FL Zip Code: 32778
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19092
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): PETER W CARMEL, MD
Mailing Address: 90 BERGEN STREET
City: NEWARK State: NJ Zip Code: 07103
FEC ID number of contributing federal political committee: C
Name of Employer: UMDNS
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19135
Amount of Each Receipt this Period: 450.00

C.
Full Name (Last, First, Middle Initial): S WILLIAM CLARK, III MD
Mailing Address: 502 ISABELLA STREET
City: WAYCROSS State: GA Zip Code: 81502
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19127
Amount of Each Receipt this Period: 450.00

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

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

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ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): MICHAEL CYS
Mailing Address: 7415 SOUTH REACH DRIVE
City: FAIRFAX STATION State: VA Zip Code: 22039
FEC ID number of contributing federal political committee: C
Name of Employer: AMERICAN MEDICAL ASSOCIAT-ION
Occupation: EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19147
Amount of Each Receipt this Period: 41.66

B.
Full Name (Last, First, Middle Initial): STEVEN E DAVIS, MD
Mailing Address: 444 DILLON CR NE
City: NORTH CANTON State: OH Zip Code: 44720
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 06 / 15 / 2006
Transaction ID: SA11A1.19036
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial): THOMAS DAYSPRING, MD
Mailing Address: 516 HAMBURG TPKE
City: WAYNE State: NJ Zip Code: 07470
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 227.25
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19149
Amount of Each Receipt this Period: 45.45

SUBTOTAL of Receipts This Page (optional) ..... ▶ **387.11**

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

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

A.
Full Name (Last, First, Middle Initial): MICHIGAN DOCTORS PAC
Mailing Address: PO BOX 769
City: EAST LANSING State: MI Zip Code: 48826
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 19580.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19045
Amount of Each Receipt this Period: 4620.00

B.
Full Name (Last, First, Middle Initial): ROBERT F DUNDERVILL, III MD
Mailing Address: 409 WOODBRIDGE DRIVE
City: CHARLESTON State: WV Zip Code: 25311
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19067
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): NC MEDICAL POL EDUC & ACTION CMMT
Mailing Address: PO BOX 25834
City: RALEIGH State: NC Zip Code: 27611
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 11950.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19030
Amount of Each Receipt this Period: 650.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5770.00

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

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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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 18000.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19082
Amount of Each Receipt this Period: 1650.00

B.
Full Name (Last, First, Middle Initial): SCOTT F FERGUSON, MD
Mailing Address: PO BOX 1140
City: HARRISON State: AR Zip Code: 72602
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19095
Amount of Each Receipt this Period: 450.00

C.
Full Name (Last, First, Middle Initial): JANE CK FITCH, MD
Mailing Address: 7351 BAYLINER LAUNCH
City: EDMOND State: OK Zip Code: 73013
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19064
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2600.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): JANE CK FITCH, MD
Mailing Address: 7351 BAYLINER LAUNCH
City: EDMOND State: OK Zip Code: 73013
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1050.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19065
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): MARGARET GARIKES
Mailing Address: 136 F STREET SE
City: WASHINGTON State: DC Zip Code: 20003
FEC ID number of contributing federal political committee: C
Name of Employer: AMERICAN MEDICAL ASSOCIATION
Occupation: ASSOCIATION EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19150
Amount of Each Receipt this Period: 41.66

C.
Full Name (Last, First, Middle Initial): JEFF GONZALEZ, MD
Mailing Address: 1228 WEST AVENUE
City: MIAMI BEACH State: FL Zip Code: 33139
FEC ID number of contributing federal political committee: C
Name of Employer: UNIV OF MIAMI
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19152
Amount of Each Receipt this Period: 41.66

SUBTOTAL of Receipts This Page (optional) ..... ▶ 583.32

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RANDY GROSSMAN, MD
Mailing Address: 580 COLLINS DRIVE
City: MERCED State: CA Zip Code: 85348
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19073
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial): VIRGINIA HALL, MD
Mailing Address: 368 SCOUT LANE
City: HUMMELSTOWN State: PA Zip Code: 17036
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19053
Amount of Each Receipt this Period: 450.00

C.
Full Name (Last, First, Middle Initial): R MARK HATFIELD, MD
Mailing Address: 1621 WOODVALE DRIVE
City: CHARLESTON State: WV Zip Code: 25314
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19069
Amount of Each Receipt this Period: 500.00

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): CYRIL M HETSKO, MD
Mailing Address: 1114 SHERMAN AVENUE
City: MADISON State: WI Zip Code: 53703
FEC ID number of contributing federal political committee: C
Name of Employer: AMERICAN MEDICAL ASSOCIATION
Occupation: BOARD OF TRUSTEES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19071
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): JULIUS W HOBSON, JR
Mailing Address: 3600 38TH STREET NW
City: WASHINGTON State: DC Zip Code: 20016
FEC ID number of contributing federal political committee: C
Name of Employer: AMERICAN MEDICAL ASSOCIATION
Occupation: ASSOCIATION EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19160
Amount of Each Receipt this Period: 41.66

C.
Full Name (Last, First, Middle Initial): WILLIAM H HUFFAKER, MD
Mailing Address: 456 N NEW BALLAS ROAD
City: ST LOUIS State: MO Zip Code: 63141
FEC ID number of contributing federal political committee: C
Name of Employer: ST LOUIS COSMETIC SURGERY
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19119
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 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): MELISSA MAXWELL HUNT, MD
Mailing Address: 820 SPRING ROAD
City: CHARLESTON State: WV Zip Code: 25314
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19057
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): DIANE HUNTER
Mailing Address: 608 NW 9TH STREET
City: OKLAHOMA CITY State: OK Zip Code: 73102
FEC ID number of contributing federal political committee: C
Name of Employer: DAVID HUNTER MD
Occupation: OFFICE MANAGER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19193
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): HARRIET IVY JONES, MD
Mailing Address: 827 E 234TH STREET
City: BRONX State: NY Zip Code: 10466
FEC ID number of contributing federal political committee: C
Name of Employer: LINCOLN HOSPITAL
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19087
Amount of Each Receipt this Period: 500.00

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): DEBRA JUDELSON, MD
Mailing Address: 139 N CARSON ROAD
City: BEVERLY HILLS State: CA Zip Code: 90211
FEC ID number of contributing federal political committee: C
Name of Employer: CARDIOVESC MED CORP OF S CA
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19055
Amount of Each Receipt this Period: 450.00

B.
Full Name (Last, First, Middle Initial): RANDEEP KAHLON, MD
Mailing Address: 4745 STANTON OGLETOWN ROAD
City: NEWARK State: DE Zip Code: 19713
FEC ID number of contributing federal political committee: C
Name of Employer: FIRST STATE ORTHOPAEDICS
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 301.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19137
Amount of Each Receipt this Period: 251.00

C.
Full Name (Last, First, Middle Initial): JOHN A KNOTE, MD
Mailing Address: 205 ROSEBANK LANE
City: W LAFAYETTE State: IN Zip Code: 47906
FEC ID number of contributing federal political committee: C
Name of Employer: JN RADIOLOGY PARTNERS
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19106
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 1201.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): GEORGE KRZYMOWSKI, MD
Mailing Address: 741 LAKEWOOD LANE
City: MARQUETTE State: MI Zip Code: 49855
FEC ID number of contributing federal political committee: C
Name of Employer: MED LABS OF MARQUETTE
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19089
Amount of Each Receipt this Period: 200.00

B.
Full Name (Last, First, Middle Initial): RAJ BEHARI LAL, MD
Mailing Address: 2809 MEYERS ROAD
City: OAK BROOK State: IL Zip Code: 60523
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19099
Amount of Each Receipt this Period: 450.00

C.
Full Name (Last, First, Middle Initial): MARIA LA PORTA, MD
Mailing Address: 2202 HARLEM ROAD
City: LOVES PARK State: IL Zip Code: 61111
FEC ID number of contributing federal political committee: C
Name of Employer: ROCKFORD ANETHESIOLOGIST ASSOC
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19129
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): JOHN F LEARY
Mailing Address: 403 RUSSELL ROAD
City: ALEXANDRIA State: VA Zip Code: 22301
FEC ID number of contributing federal political committee: C
Name of Employer: AMERICAN MEDICAL ASSOCIATION
Occupation: EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19171
Amount of Each Receipt this Period: 41.66

B.
Full Name (Last, First, Middle Initial): JO E LINDER, MD
Mailing Address: 18 STAGECOACH ROAD
City: FALMOUTH State: ME Zip Code: 04105
FEC ID number of contributing federal political committee: C
Name of Employer: MAINE MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19131
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): ERIC LINDSTROM, MD
Mailing Address: PO BOX 407
City: LAUREL State: MS Zip Code: 35440
FEC ID number of contributing federal political committee: C
Name of Employer: LINDSTROM EYE CLINIC
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19109
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): VICKIE MASSEY, MD
Mailing Address: 805 W 51ST STREET
City: KANSAS CITY State: MO Zip Code: 64112
FEC ID number of contributing federal political committee: C
Name of Employer: KANSAS CITY CANCER CENTER
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19097
Amount of Each Receipt this Period: 450.00

B.
Full Name (Last, First, Middle Initial): JOY A MAXEY, MD
Mailing Address: 3091 MAPLE DRIVE
City: ATLANTA State: GA Zip Code: 30305
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19173
Amount of Each Receipt this Period: 41.66

C.
Full Name (Last, First, Middle Initial): WILLIAM DAVID MCCLENDON, JR
Mailing Address: 916 MANSHIP STREET
City: JACKSON State: MS Zip Code: 39202
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: STUDENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19242
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 741.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): ALASKA MEDICAL PAC
Mailing Address: 4107 LAUREL STREET
City: ANCHORAGE State: AK Zip Code: 99508
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 06 / 02 / 2006
Transaction ID: SA11A1.19017
Amount of Each Receipt this Period: 700.00

B.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 11690.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19024
Amount of Each Receipt this Period: 3270.00

C.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 4590.00
Date of Receipt: 06 / 02 / 2006
Transaction ID: SA11A1.19019
Amount of Each Receipt this Period: 350.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4320.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 4840.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19025
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): CALIFORNIA MEDICAL PAC
Mailing Address: 221 MAIN STREET
City: SAN FRANCISCO State: CA Zip Code: 94105
FEC ID number of contributing federal political committee: C
Name of Employer: NA
Occupation: NA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 50690.86
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19081
Amount of Each Receipt this Period: 2233.33

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2090.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19041
Amount of Each Receipt this Period: 1390.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3873.33

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CONNECTICUT MEDICAL PAC
Mailing Address: 160 ST RONAN STREET
City: NEW HAVEN State: CT Zip Code: 06511
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 19660.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19049
Amount of Each Receipt this Period: 1350.00

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3400.00
Date of Receipt: 06 / 02 / 2006
Transaction ID: SA11A1.19018
Amount of Each Receipt this Period: 1050.00

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 33030.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19026
Amount of Each Receipt this Period: 4520.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6920.00**

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

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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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 33910.00
Date of Receipt: 06 / 30 / 2006
Transaction ID: SA11A1.19235
Amount of Each Receipt this Period: 880.00

B.
Full Name (Last, First, Middle Initial): IDAHO MEDICAL PAC
Mailing Address: PO BOX 2668
City: BOISE State: ID Zip Code: 83701
FEC ID number of contributing federal political committee: C
Name of Employer: NA
Occupation: NA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19042
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): IDAHO MEDICAL PAC
Mailing Address: PO BOX 2668
City: BOISE State: ID Zip Code: 83701
FEC ID number of contributing federal political committee: C
Name of Employer: NA
Occupation: NA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19077
Amount of Each Receipt this Period: 550.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1680.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
ILLINOIS MEDICAL PAC
Mailing Address 20 N MICHIGAN AVENUE
City: CHICAGO State: IL Zip Code: 60602
FEC ID number of contributing federal political committee. C
Name of Employer: N/A
Occupation: n/a
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 12475.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19029
Amount of Each Receipt this Period: 3050.00

B.
Full Name (Last, First, Middle Initial)
INDIANA MEDICAL PAC
Mailing Address 322 CANAL WALK
City: INDIANAPOLIS State: IN Zip Code: 46202
FEC ID number of contributing federal political committee. C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 46300.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19044
Amount of Each Receipt this Period: 250.00

C.
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. C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 11320.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19022
Amount of Each Receipt this Period: 1300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4600.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 11770.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19023
Amount of Each Receipt this Period: 450.00

B.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 19900.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19080
Amount of Each Receipt this Period: 400.00

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 16030.00
Date of Receipt: 06 / 02 / 2006
Transaction ID: SA11A1.19021
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 16630.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19083
Amount of Each Receipt this Period: 600.00

B.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 8400.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19048
Amount of Each Receipt this Period: 1980.00

C.
Full Name (Last, First, Middle Initial): MISSISSIPPI MEDICAL PAC
Mailing Address: PO BOX 2548
City: RIDGELAND State: MS Zip Code: 39158
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 8270.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19047
Amount of Each Receipt this Period: 225.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2805.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): MONTANA MEDICAL PAC
Mailing Address: 2021 ELEVENTH AVENUE
City: HELENA State: MT Zip Code: 59601
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5825.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19244
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial): NEBRASKA MEDICAL PAC
Mailing Address: 233 S 13TH STREET
City: LINCOLN State: NE Zip Code: 68508
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1235.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19076
Amount of Each Receipt this Period: 585.00

C.
Full Name (Last, First, Middle Initial): OHIO MEDICAL PAC
Mailing Address: 3401 MILL RUN DRIVE
City: HILLIARD State: OH Zip Code: 43206
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 19870.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19050
Amount of Each Receipt this Period: 4130.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5015.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 9565.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19078
Amount of Each Receipt this Period: 750.00

B.
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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 9935.00
Date of Receipt: 06 / 23 / 2006
Transaction ID: SA11A1.19079
Amount of Each Receipt this Period: 370.00

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 31100.00
Date of Receipt: 06 / 02 / 2006
Transaction ID: SA11A1.19020
Amount of Each Receipt this Period: 900.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2020.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 31650.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19028
Amount of Each Receipt this Period: 550.00

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 35750.00
Date of Receipt: 06 / 30 / 2006
Transaction ID: SA11A1.19237
Amount of Each Receipt this Period: 4100.00

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: C
Name of Employer: NA
Occupation: NA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 7430.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19046
Amount of Each Receipt this Period: 700.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5350.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): UTAH MEDICAL PAC
Mailing Address: 540 EAST FIFTH SOUTH
City: SALT LAKE CITY State: UT Zip Code: 84102
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2840.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19027
Amount of Each Receipt this Period: 2340.00

B.
Full Name (Last, First, Middle Initial): UTAH MEDICAL PAC
Mailing Address: 540 EAST FIFTH SOUTH
City: SALT LAKE CITY State: UT Zip Code: 84102
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3400.00
Date of Receipt: 06 / 30 / 2006
Transaction ID: SA11A1.19234
Amount of Each Receipt this Period: 560.00

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: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 4350.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19051
Amount of Each Receipt this Period: 900.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3800.00**

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

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

A.
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: C
Name of Employer: NA
Occupation: NA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 26300.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19034
Amount of Each Receipt this Period: 800.00

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: C
Name of Employer: NA
Occupation: NA
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 26800.00
Date of Receipt: 06 / 30 / 2006
Transaction ID: SA11A1.19236
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): WISCONSIN PHYSICIANS MEDICAL PAC
Mailing Address: PO BOX 2295
City: MADISON State: WI Zip Code: 53701
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 12175.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19031
Amount of Each Receipt this Period: 350.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1650.00**

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

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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 2295
City: MADISON State: WI Zip Code: 53701
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 12625.00
Date of Receipt: 06 / 30 / 2006
Transaction ID: SA11A1.19238
Amount of Each Receipt this Period: 450.00

B.
Full Name (Last, First, Middle Initial): INDEPENDENT MEDICINES PAC
Mailing Address: 2301 21ST AVENUE SOUTH
City: NASHVILLE State: TN Zip Code: 37212
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 17100.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19043
Amount of Each Receipt this Period: 2100.00

C.
Full Name (Last, First, Middle Initial): BRIAN MACDERMOTT MEHLING, MD
Mailing Address: 330 E 38TH STREET
City: NEW YORK State: NY Zip Code: 10016
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19125
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3050.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): NANCY R NEAL
Mailing Address: 4809 19TH STREET
City: LUBBOCK State: TX Zip Code: 79407
FEC ID number of contributing federal political committee: C
Name of Employer: THOMAS F NEAL MD
Occupation: NURSE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.33
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19174
Amount of Each Receipt this Period: 111.11

B.
Full Name (Last, First, Middle Initial): NANCY R NEAL
Mailing Address: 4809 19TH STREET
City: LUBBOCK State: TX Zip Code: 79407
FEC ID number of contributing federal political committee: C
Name of Employer: THOMAS F NEAL MD
Occupation: NURSE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19093
Amount of Each Receipt this Period: 666.67

C.
Full Name (Last, First, Middle Initial): NANCY NIELSEN, MD
Mailing Address: 7861 E QUAKER ROAD
City: ORCHARD PARK State: NY Zip Code: 14127
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY AT BUFFALO
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19111
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1277.78

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ND COMMISSION ON MED POL ACTION
Mailing Address: PO BOX 5538
City: BISMARK State: ND Zip Code: 58501
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2650.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19032
Amount of Each Receipt this Period: 450.00

B.
Full Name (Last, First, Middle Initial): DAVID PAULUS, MD
Mailing Address: 1125 NW 23 TERRACE
City: GAINESVILLE State: FL Zip Code: 32605
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19113
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): MARC PETEIN, MD
Mailing Address: 13849 N 65TH AVENUE
City: GLENDALE State: AZ Zip Code: 85306
FEC ID number of contributing federal political committee: C
Name of Employer: CARDIAC CARE CONSULTANTS
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19123
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1450.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WILLIAM C PIERCE, MD
Mailing Address: 961 GLEN EDEN CT NW
City: SALEM State: OR Zip Code: 97304
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19075
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): JOHN STEVEN POLSLEY, MD
Mailing Address: 162 NEW HAVEN DRIVE
City: URBANA State: OH Zip Code: 43078
FEC ID number of contributing federal political committee: C
Name of Employer: FAMILY PHYSICIANS OF URBA-NA
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19177
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): ROBERT PUCHALSKI, MD
Mailing Address: 3 PUDDLE LANE
City: CAMDEN State: SC Zip Code: 29020
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19101
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1550.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NESTOR A RAMIREZ-LOPEZ, MD
Mailing Address: 800 E CARPENTER STREET
City: SPRINGFIELD State: IL Zip Code: 62769
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 299.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19179
Amount of Each Receipt this Period: 41.66

B.
Full Name (Last, First, Middle Initial): ALEXANDER BRUCE REID, MD
Mailing Address: 717 S 8TH STREET
City: GRIFFIN State: GA Zip Code: 30224
FEC ID number of contributing federal political committee: C
Name of Employer: ORTHO & SPORTS INJURY CTR
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19121
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): MATTHEW M RICE, MD
Mailing Address: 8320 GOODMAN DRIVE NW
City: GIG HARBOR State: WA Zip Code: 98332
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 01 / 2006
Transaction ID: SA11A1.19016
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 491.66

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): STEPHEN H ROYAL, MD
Mailing Address: 6080 MIDUS STREET
City: HOPE MILLS State: NC Zip Code: 28348
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19062
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): DAVID J SCHIFELING, MD
Mailing Address: 900 W CLAIRMONT DRIVE
City: EAU CLAIRE State: WI Zip Code: 54701
FEC ID number of contributing federal political committee: C
Name of Employer: MARSHFIELD CLINIC
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19183
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): JOEL LORNE SHANKLIN, MD
Mailing Address: 900 MOHAWK STREET
City: SAVANNAH State: GA Zip Code: 31419
FEC ID number of contributing federal political committee: C
Name of Employer: COASTAL EMPIRE PLASTIC SURGERY
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19085
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A.
Full Name (Last, First, Middle Initial): PHILLIP R STEVENS, MD
Mailing Address: 3 STONECREST DRIVE
City: HUNTINGTON State: WV Zip Code: 25701
FEC ID number of contributing federal political committee: C
Name of Employer: TSO INC
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 12 / 2006
Transaction ID: SA11A1.19133
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): MEDICAL SOC OF THE ST OF NY PAC
Mailing Address: ONE COMMERCE PLAZA
City: ALBANY State: NY Zip Code: 12210
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: N/A
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 59580.00
Date of Receipt: 06 / 09 / 2006
Transaction ID: SA11A1.19033
Amount of Each Receipt this Period: 5730.00

C.
Full Name (Last, First, Middle Initial): BIJO THOMAS, MD
Mailing Address: 3306 ESTATE DRIVE
City: OAKDALE State: PA Zip Code: 15071
FEC ID number of contributing federal political committee: C
Name of Employer: WESTERN PA HOSPITAL
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 / 05 / 2006
Transaction ID: SA11A1.19141
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **6480.00**

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)
[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): DONALD TIMMERMAN, MD
Mailing Address: 1817 MAIN STREET
City: GLASTONBUAN State: CT Zip Code: 06033
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19117
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): RAYMOND T URBAN, MD
Mailing Address: 2170 WINGATE DRIVE
City: DELAWARE State: OH Zip Code: 43015
FEC ID number of contributing federal political committee: C
Name of Employer: RIVERWIDE RADIOLOGY
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 15 / 2006
Transaction ID: SA11A1.19038
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): JOHN M VAN ETTA, MD
Mailing Address: 1535 SKYWOOD LANE
City: DULUTH State: MN Zip Code: 55805
FEC ID number of contributing federal political committee: C
Name of Employer: ST LUKES INT MED ASSOC
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19185
Amount of Each Receipt this Period: 41.66

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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)
[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): LINDA L VAN ETTA
Mailing Address: 1525 SKYWOOD LANE
City: DULUTH State: MN Zip Code: 55805
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: SPOUSE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19186
Amount of Each Receipt this Period: 41.66

B.
Full Name (Last, First, Middle Initial): CATHERINE N VARLEY
Mailing Address: 1741 WOODVALE DRIVE
City: CHARLESTON State: WV Zip Code: 25314
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: HOUSEWIFE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19060
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): NALLASIVAM VIVEKANANDAN, MD
Mailing Address: 313 MEADOW VIEW
City: WILLIAMSVILLE State: NY Zip Code: 14221
FEC ID number of contributing federal political committee: C
Name of Employer: MAPLE GATES ANESTHESIOLOG-IST
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 15 / 2006
Transaction ID: SA11A1.19040
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1041.66**

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)
[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): DE ANN WALPOLE
Mailing Address: 1118 KENSINGTON LAKE DRIVE
City: EASLEY State: SC Zip Code: 29642
FEC ID number of contributing federal political committee: C
Name of Employer: POWDERSVILLE INTERNAL MEDICINE
Occupation: CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19104
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): STEPHEN R WALTMAN, MD
Mailing Address: 35 FRONTENAC ESTATES
City: ST LOUIS State: MO Zip Code: 63131
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 22 / 2006
Transaction ID: SA11A1.19059
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): PAUL A WERTSCH, MD
Mailing Address: 4221 VENETIAN LANE
City: MADISON State: WI Zip Code: 53718
FEC ID number of contributing federal political committee: C
Name of Employer: WILDWOOD FAMILY CLINIC
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 / 20 / 2006
Transaction ID: SA11A1.19115
Amount of Each Receipt this Period: 500.00

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

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)
[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): STEVEN R WEST, MD
Mailing Address: 15636 FIDDESTICKS BOULEVARD
City: FORT MYERS State: FL Zip Code: 33912
FEC ID number of contributing federal political committee: C
Name of Employer: SWFNG
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19189
Amount of Each Receipt this Period: 41.66

B.
Full Name (Last, First, Middle Initial): JAMES W WOOLDRIDGE, JR MD
Mailing Address: 13510 KINGSMILL ROAD
City: MIDLOTHIAN State: VA Zip Code: 23113
FEC ID number of contributing federal political committee: C
Name of Employer: CENTRAL VA FAMILY PSYCHIATRY
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 06 / 01 / 2006
Transaction ID: SA11A1.19014
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): LAMBERT WU, MD
Mailing Address: 929 SW MULVANE STREET
City: TOPEKA State: KS Zip Code: 66606
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 299.96
Date of Receipt: 06 / 16 / 2006
Transaction ID: SA11A1.19168
Amount of Each Receipt this Period: 41.66

SUBTOTAL of Receipts This Page (optional) ..... ▶ **333.32**

TOTAL This Period (last page this line number only) ..... ▶ **82199.14**

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)
☐ 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)
PNC ADVISORS

Mailing Address PO BOX 96211

City: WASHINGTON
State: DC
Zip Code: 20090

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
50519.83

Date of Receipt
M M 06 / D D 30 / Y Y Y Y 2006

Transaction ID: SA17.19254

Amount of Each Receipt this Period
10304.03

INTEREST

SUBTOTAL of Receipts This Page (optional) ..... ▶ **10304.03**

TOTAL This Period (last page this line number only) ..... ▶ **10304.03**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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

A.
Full Name (Last, First, Middle Initial)
FIRST NATIONAL MERCHANT SOLUTIONS

Mailing Address 1620 DODGE STREET

City OMAHA State NE Zip Code 68197

Purpose of Disbursement
CREDIT CARD BANK CHARGES

Candidate Name

001 Category/Type

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

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.19253
Date of Disbursement M M 06 / D D 30 / Y Y Y Y 2006

Amount of Each Disbursement this Period
686.84

B.
Full Name (Last, First, Middle Initial)
PNC ADVISORS

Mailing Address PO BOX 96211

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
BANK CHARGES

Candidate Name

001 Category/Type

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

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.19255
Date of Disbursement M M 06 / D D 30 / Y Y Y Y 2006

Amount of Each Disbursement this Period
326.43

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1013.27**

TOTAL This Period (last page this line number only) ..... ▶ **1013.27**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate 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 [ ] 30b

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

A.
Full Name (Last, First, Middle Initial): ALABAMA MEDICAL PAC
Mailing Address: PO BOX 1900
City: MONTGOMERY State: AL Zip Code: 36102
Purpose of Disbursement: TRANSFER OF FUNDS JOINT FUNDRAISING
Candidate Name:
Category/Type: 008
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB22.19006
Date of Disbursement: 06 / 27 / 2006
Amount of Each Disbursement this Period: 200.00

B.
Full Name (Last, First, Middle Initial): OREGON MEDICAL PAC
Mailing Address: 5210 SW CORBETT STREET
City: PORTLAND State: OR Zip Code: 97201
Purpose of Disbursement: TRANSFER OF FUNDS JOINT FUNDRAISING
Candidate Name:
Category/Type: 008
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB22.19005
Date of Disbursement: 06 / 27 / 2006
Amount of Each Disbursement this Period: 50.00

C.
Full Name (Last, First, Middle Initial): WISCONSIN PHYSICIANS MEDICAL PAC
Mailing Address: PO BOX 2595
City: MADISON State: WI Zip Code: 53701
Purpose of Disbursement: TRANSFER OF FUNDS JOINT FUNDRAISING
Candidate Name:
Category/Type: 008
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB22.18937
Date of Disbursement: 06 / 05 / 2006
Amount of Each Disbursement this Period: 50.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **300.00**

TOTAL This Period (last page this line number only) ..... ▶ **300.00**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate 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

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

A.
Full Name (Last, First, Middle Initial): BARNEY FRANK FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 260
City: NEWTONVILLE State: MA Zip Code: 02160
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: BARNEY FRANK
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19219
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): BARRETT FOR CONGRESS
Mailing Address: PO BOX 869
City: WESTMINSTER State: SC Zip Code: 29693
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JAMES GRESHAM BARRETT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: SC District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18956
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): BARRETT FOR CONGRESS
Mailing Address: PO BOX 869
City: WESTMINSTER State: SC Zip Code: 29693
Purpose of Disbursement: 2006 PRIMARY-VOID 2/16/06 CHK
Candidate Name: JAMES GRESHAM BARRETT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: SC District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19208
Date of Disbursement: 06 / 30 / 2006
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 seperate 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

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

A.
Full Name (Last, First, Middle Initial): BEILENSON FOR CONGRESS
Mailing Address: 5820 YORK ROAD
City: BALTIMORE State: MD Zip Code: 21212
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: PETER BEILENSON
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MD District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18997
Date of Disbursement: 06 / 22 / 2006
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): BEN CARDIN FOR SENATE
Mailing Address: PO BOX 65056
City: BALTIMORE State: MD Zip Code: 21209
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: BENJAMIN L CARDIN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MD District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18995
Date of Disbursement: 06 / 22 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): BOUCHER FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 2000
City: ABINGDON State: VA Zip Code: 24212
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: FREDERICK C 'RICK' BOUCHER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 09
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18953
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

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 seperate 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

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

A.
Full Name (Last, First, Middle Initial): BURGESS FOR CONGRESS
Mailing Address: PO BOX 2334
City: DENTON State: TX Zip Code: 76202
Purpose of Disbursement: 2006 GENERAL
Candidate Name: MICHAEL CLIFTON BURGESS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 26
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.18936
Date of Disbursement: 06 / 05 / 2006
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): CANDICE MILLER FOR CONGRESS
Mailing Address: PO BOX 182152
City: SHELBY TOWNSHIP State: MI Zip Code: 48318
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: CANDICE S MILLER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 10
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18984
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 3000.00

C.
Full Name (Last, First, Middle Initial): CANTOR FOR CONGRESS
Mailing Address: PO BOX 17813
City: RICHMOND State: VA Zip Code: 23226
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: ERIC IVAN CANTOR
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 07
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18952
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **13000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate 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

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

A.
Full Name (Last, First, Middle Initial): CHRIS CHOCOLA FOR CONGRESS
Mailing Address: PO BOX 6728
City: SOUTH BEND State: IN Zip Code: 46660
Purpose of Disbursement: 2006 GENERAL
Candidate Name: JOSEPH CHRISTOPHER CHOCOLA
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 02
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.18992
Date of Disbursement: 06 / 22 / 2006
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): CLAY JR. FOR CONGRESS
Mailing Address: PO BOX 9544
City: ST LOUIS State: MO Zip Code: 63108
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: WILLIAM LACY JR CLAY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18962
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): CLEAVER FOR CONGRESS
Mailing Address: 4801 MAIN STREET
City: KANSAS CITY State: MO Zip Code: 64112
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: EMANUEL II CLEAVER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 05
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18965
Date of Disbursement: 06 / 16 / 2006
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 seperate 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

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

A.
Full Name (Last, First, Middle Initial): COLE FOR CONGRESS
Mailing Address: PO BOX 722256
City: NORMAN State: OK Zip Code: 73070
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: TOM COLE
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: OK District: 4
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19225
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): COMMITTEE TO REELECT CONGRESSMAN DANA ROHRABACHER
Mailing Address: PO BOX 823
City: HUNTINGTON BEACH State: CA Zip Code: 92648
Purpose of Disbursement: 2006 PRIMARY-VOID 3/29/2006 CHK
Candidate Name: DANA ROHRABACHER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 46
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19247
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: -1000.00

C.
Full Name (Last, First, Middle Initial): COMMITTEE TO REELECT CONGRESSMAN DANA ROHRABACHER
Mailing Address: PO BOX 823
City: HUNTINGTON BEACH State: CA Zip Code: 92648
Purpose of Disbursement: 2006 PRIMARY-VOID 4/5/2006 CHK
Candidate Name: DANA ROHRABACHER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 46
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19249
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: -1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate 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

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

A.
Full Name (Last, First, Middle Initial): CONGRESSMAN KILDEE COMMITTEE
Mailing Address: PO BOX 317
City: FLINT State: MI Zip Code: 48501
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: DALE E KILDEE
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 05
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18980
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): CONYERS FOR CONGRESS
Mailing Address: 1031 N EDGEWOOD STREET
City: ARLINGTON State: VA Zip Code: 22201
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOHN JR CONYERS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 14
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18989
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): CROWLEY FOR CONGRESS
Mailing Address: 84-56 GRAND AVENUE
City: ELMHURST State: NY Zip Code: 11373
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOSEPH CROWLEY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 07
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18947
Date of Disbursement: 06 / 06 / 2006
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 seperate 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): DAVE CAMP FOR CONGRESS
Mailing Address: 5915 EASTMAN AVENUE
City: MIDLAND State: MI Zip Code: 48640
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: DAVID LEE CAMP
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18979
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): DAVID MCSWEENEY FOR CONGRESS
Mailing Address: 8 HUBBELL COURT
City: BARRINGTON HILLS State: IL Zip Code: 60010
Purpose of Disbursement: 2006 PRIMARY DEFICIT
Candidate Name: S. DAVID MCSWEENEY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 8
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18971
Date of Disbursement: 06 / 26 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): DELAHUNT FOR CONGRESS COMMITTEE
Mailing Address: 332 VICTORY ROAD
City: QUINCY State: MA Zip Code: 02171
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: WILLIAM D DELAHUNT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 10
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19222
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): DIANA DEGETTE FOR CONGRESS
Mailing Address: PO BOX 61337
City: DENVER State: CO Zip Code: 80206
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: DIANA L DEGETTE
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19000
Date of Disbursement: 06 / 23 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): DR HUNTER FOR CONGRESS
Mailing Address: PO BOX 2119
City: OKLAHOMA CITY State: OK Zip Code: 73101
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: PAUL DAVID HUNTER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: OK District: 05
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19229
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): EHLERS FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 3340
City: GRAND RAPIDS State: MI Zip Code: 49501
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: VERNON J EHLERS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18978
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): ENGEL FOR CONGRESS
Mailing Address: 38 IVY STREET SE
City: WASHINGTON State: DC Zip Code: 20003
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: ELIOT L ENGEL
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 17
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19216
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): FERGUSON FOR CONGRESS
Mailing Address: PO BOX 225
City: COLONIA State: NJ Zip Code: 07067
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: MIKE FERGUSON
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 06
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18934
Date of Disbursement: 06 / 05 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): FITZPATRICK FOR CONGRESS
Mailing Address: 115 NORTH BROAD STREET
City: DOYLESTOWN State: PA Zip Code: 18901
Purpose of Disbursement: 2006 GENERAL
Candidate Name: MICHAEL G FITZPATRICK
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 08
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.19002
Date of Disbursement: 06 / 23 / 2006
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): FORBES FOR CONGRESS
Mailing Address: PO Box 15100
City: Chesapeake State: VA Zip Code: 23328
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: J RANDY FORBES
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18951
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): FRIENDS OF DAVE REICHERT
Mailing Address: PO BOX 53322
City: BELLEVUE State: WA Zip Code: 98015
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: DAVE REICHERT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: WA District: 08
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18970
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): FRIENDS OF FRANK WOLF
Mailing Address: PO BOX 3015
City: OAK HILL State: VA Zip Code: 20171
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: FRANK RUDOLPH WOLF
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 10
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18954
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): FRIENDS OF HILLARY
Mailing Address: 1717 K STREET NW
City: WASHINGTON State: DC Zip Code: 20036
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: HILLARY RODHAM CLINTON
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: NY District: 00
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18933
Date of Disbursement: 06 / 01 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): FRIENDS OF JIM CLYBURN
Mailing Address: PO BOX 12567
City: COLUMBIA State: SC Zip Code: 29211
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JAMES E CLYBURN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: SC District: 06
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18944
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): FRIENDS OF JOE PITTS
Mailing Address: PO BOX 775
City: UNIONVILLE State: PA Zip Code: 19375
Purpose of Disbursement: 2006 PRIMARY-VOID 4/3/2006 CHK
Candidate Name: JOSEPH R PITTS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 16
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19248
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: -3000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): FRIENDS OF KENT CONRAD
Mailing Address: PO BOX 812
City: BISMARCK State: ND Zip Code: 58502
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: KENT CONRAD
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: ND District: 00
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18939
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): FRIENDS OF PATRICK J KENNEDY
Mailing Address: PO BOX 321
City: PAWTUCKET State: RI Zip Code: 02862
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: PATRICK J KENNEDY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: RI District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19003
Date of Disbursement: 06 / 23 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): FRIENDS OF ROY BLUNT
Mailing Address: PO BOX 50100
City: SPRINGFIELD State: MO Zip Code: 65805
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: ROY BLUNT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 07
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18967
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): GRAVES FOR CONGRESS
Mailing Address: 2345 GRAND
City: KANSAS CITY State: MO Zip Code: 64108
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: SAMUEL B JR (SAM) GRAVES
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 06
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18966
Date of Disbursement: 06 / 15 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): HEATHER WILSON FOR CONGRESS
Mailing Address: PO BOX 14070
City: ALBUQUERQUE State: NM Zip Code: 87191
Purpose of Disbursement: 2006 GENERAL
Candidate Name: HEATHER A WILSON
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NM District: 01
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.19212
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): HENRY E BROWN JR FOR CONGRESS
Mailing Address: PO BOX 61886
City: NORTH CHARLESTON State: SC Zip Code: 29419
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: HENRY E JR. BROWN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: SC District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18940
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): HULSHOF FOR CONGRESS
Mailing Address: PO BOX 1621
City: COLUMBIA State: MO Zip Code: 65010
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: KENNY CHARLES HULSHOF
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 09
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19218
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): IKE SKELTON FOR CONGRESS COMMITTEE
Mailing Address: PO BOX A
City: HARRISONVILLE State: MO Zip Code: 64701
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: IKE SKELTON
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18964
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): INGLIS FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 361
City: GREENVILLE State: SC Zip Code: 29602
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: ROBERT D INGLIS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: SC District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18942
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 1000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): J D HAYWORTH FOR CONGRESS
Mailing Address: 14300 N NORTHSIGHT BLVD
City: SCOTTSDALE State: AZ Zip Code: 85260
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: HAYWORTH, J D
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: AZ District: 05
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18946
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 3000.00

B.
Full Name (Last, First, Middle Initial): JIM GERLACH FOR CONGRESS
Mailing Address: PO BOX 87
City: UWCHLAND State: PA Zip Code: 19480
Purpose of Disbursement: 2006 GENERAL
Candidate Name: JIM GERLACH
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 06
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.19001
Date of Disbursement: 06 / 23 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): JIM RYUN FOR CONGRESS
Mailing Address: PO Box 826
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JIM R RYUN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: KS District: 02
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19210
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 1000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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

A.
Full Name (Last, First, Middle Initial): JO ANN DAVIS FOR CONGRESS
Mailing Address: PO BOX 1834
City: YORKTOWN State: VA Zip Code: 23692
Purpose of Disbursement: 2006 PRIMARY
Category/Type: 011
Candidate Name: JO ANN S DAVIS
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18949
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): JOHN D DINGELL FOR CONGRESS COMMITTEE
Mailing Address: 607 14TH STREET NW
City: WASHINGTON State: DC Zip Code: 20005
Purpose of Disbursement: 2006 PRIMARY
Category/Type: 011
Candidate Name: JOHN D DINGELL
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 15
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18990
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): JOHN SALAZAR FOR CONGRESS
Mailing Address: PO BOX 534
City: PUEBLO State: CO Zip Code: 81002
Purpose of Disbursement: 2006 PRIMARY
Category/Type: 011
Candidate Name: JOHN T MR. SALAZAR
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 3
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18958
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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

A.
Full Name (Last, First, Middle Initial): JOHN SULLIVAN FOR CONGRESS
Mailing Address: PO BOX 470840
City: TULSA State: OK Zip Code: 74147
Purpose of Disbursement: 2006 PRIMARY
Category/Type: 011
Candidate Name: JOHN SULLIVAN
Office Sought: [X] House [ ] Senate [ ] President
State: OK District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19223
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): KILPATRICK FOR UNITED STATES CONGRESS
Mailing Address: PO BOX 32175
City: DETROIT State: MI Zip Code: 48232
Purpose of Disbursement: 2006 PRIMARY
Category/Type: 011
Candidate Name: CAROLYN CHEEKS KILPATRICK
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 13
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18988
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): KNOLLENBERG FOR CONGRESS COMMITTEE
Mailing Address: 31000 TELEGRAPH ROAD
City: BINGHAM FARMS State: MI Zip Code: 48025
Purpose of Disbursement: 2006 PRIMARY
Category/Type: 011
Candidate Name: JOSEPH K KNOLLENBERG
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 09
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18983
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): KUHL FOR CONGRESS
Mailing Address: 10 GANESVOORT STREET
City: BATH State: NY Zip Code: 14810
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOHN R JR KUHL
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 29
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18948
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 1500.00

B.
Full Name (Last, First, Middle Initial): LANGEVIN FOR CONGRESS
Mailing Address: 181A KNIGHT STREET
City: WARWICK State: RI Zip Code: 02886
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JAMES R LANGEVIN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: RI District: 02
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19004
Date of Disbursement: 06 / 23 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): LEVIN FOR CONGRESS COMMITTEE
Mailing Address: 230 NORTH AVENUE
City: MT CLEMENS State: MI Zip Code: 48043
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: SANDER LEVIN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 12
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18986
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 1000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): LUCAS FOR CONGRESS
Mailing Address: PO BOX 1726
City: OKLAHOMA CITY State: OK Zip Code: 73101
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: FRANK D LUCAS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: OK District: 06
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19224
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): LUCILLE ROYBAL-ALLARD FOR CONGRESS
Mailing Address: PO BOX 582
City: KENSINGTON State: MD Zip Code: 20895
Purpose of Disbursement: 2006 PRIMARY-VOID 3/29/2006 CHK
Candidate Name: LUCILLE ROYBAL-ALLARD
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 34
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19246
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: -1000.00

C.
Full Name (Last, First, Middle Initial): LUNGREN FOR CONGRESS
Mailing Address: 9312 SILVERBEND LANE
City: ELK GROVE State: CA Zip Code: 95624
Purpose of Disbursement: 2006 PRIMARY-VOID 3/29/2006 CHK
Candidate Name: DANIEL E LUNGREN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19245
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: -1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): MARKEY FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 526
City: MEDFORD State: MA Zip Code: 02155
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: EDWARD J MR. MARKEY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 07
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19221
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): MCCOTTER CONGRESSIONAL COMMITTEE
Mailing Address: PO BOX 530788
City: LIVONIA State: MI Zip Code: 48153
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: THADDEUS G MCCOTTER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 11
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18985
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): MORAN FOR KANSAS
Mailing Address: PO BOX 1151
City: HAYS State: KS Zip Code: 67601
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JERRY MORAN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: KS District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19209
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 1000.00

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

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): MUSGRAVE FOR CONGRESS
Mailing Address: 5401 STONE CREEK CIRCLE
City: LOVELAND State: CO Zip Code: 80538
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: MARILYN N MUSGRAVE
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB23.18959
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): NELSON FOR US SENATE
Mailing Address: PO BOX 8666
City: OMAHA State: NE Zip Code: 68108
Purpose of Disbursement: 2006 GENERAL
Candidate Name: E BENJAMIN NELSON
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: NE District: 00
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify) ▼
Transaction ID: SB23.18991
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): NEUGEBAUER CONGRESSIONAL COMMITTEE
Mailing Address: 3305 66TH STREET
City: LUBBOCK State: TX Zip Code: 79413
Purpose of Disbursement: 2006 GENERAL
Candidate Name: ROBERT RANDOLPH NEUGEBAUER
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 19
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify) ▼
Transaction ID: SB23.18945
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): PEARCE FOR CONGRESS
Mailing Address: PO Box 2696
City: Hobbs State: NM Zip Code: 88241
Purpose of Disbursement: 2006 GENERAL
Candidate Name: STEVE PEARCE
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NM District: 02
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.19213
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): PETER HOEKSTRA FOR CONGRESS
Mailing Address: 1454 CIMARRON DRIVE
City: HOLLAND State: MI Zip Code: 49423
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: PETER HOEKSTRA
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 02
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18977
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): ROBERT ADERHOLT FOR CONGRESS
Mailing Address: PO BOX 1158
City: HALEYVILLE State: AL Zip Code: 35565
Purpose of Disbursement: 2006 PRIMARY-VOID 4/20/2006 CHK
Candidate Name: ROBERT BROWN ADERHOLT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: AL District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19250
Date of Disbursement: 06 / 30 / 2006
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

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

A.
Full Name (Last, First, Middle Initial): ROGERS FOR CONGRESS
Mailing Address: PO BOX 581
City: BRIGHTON State: MI Zip Code: 48116
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: MICHAEL J ROGERS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 08
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18982
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 3000.00

B.
Full Name (Last, First, Middle Initial): ROY FOR CONGRESS
Mailing Address: 105 S BRYANT
City: EDMOND State: OK Zip Code: 73034
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOHNNY B. ROY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: OK District: 05
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19227
Date of Disbursement: 06 / 30 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): RUSS CARNAHAN FOR CONGRESS COMMITTEE
Mailing Address: 7370 MANCHESTER ROAD
City: ST LOUIS State: MO Zip Code: 63143
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOHN RUSSELL CARNAHAN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 03
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18963
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): SEKULA-GIBBS FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 890954
City: HOUSTON State: TX Zip Code: 77289
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: SHELLEY MD SEKULA-GIBBS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 22
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18999
Date of Disbursement: 06 / 22 / 2006
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): SHELLEY MOORE CAPITO FOR CONGRESS
Mailing Address: PO BOX 11519
City: CHARLESTON State: WV Zip Code: 25339
Purpose of Disbursement: 2006 GENERAL
Candidate Name: SHELLEY MOORE CAPITO
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: WV District: 02
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.19217
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): SPRATT FOR CONGRESS COMMITTEE
Mailing Address: PO BOX 830
City: YORK State: SC Zip Code: 29745
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOHN MCKEE JR SPRATT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: SC District: 05
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18943
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): STABENOW FOR US SENATE
Mailing Address: PO BOX 4945
City: EAST LANSING State: MI Zip Code: 48826
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: DEBBIE STABENOW
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: MI District: 00
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18975
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 3000.00

B.
Full Name (Last, First, Middle Initial): STEVE ROTHMAN FOR CONGRESS
Mailing Address: PO BOX 714
City: HACKENSACK State: NJ Zip Code: 07602
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: STEVEN R ROTHMAN
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 09
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18935
Date of Disbursement: 06 / 05 / 2006
Amount of Each Disbursement this Period: 4000.00

C.
Full Name (Last, First, Middle Initial): STUPAK FOR CONGRESS
Mailing Address: PO BOX 143
City: MENOMINEE State: MI Zip Code: 49858
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: BART STUPAK
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 01
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18976
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): TALENT FOR SENATE COMMITTEE
Mailing Address: 147 N MERAMEE
City: ST LOUIS State: MO Zip Code: 63105
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JAMES MATTHES TALENT
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: MO District: 00
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB23.18960
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 3000.00

B.
Full Name (Last, First, Middle Initial): TEAM EMERSON FOR JO ANN EMERSON
Mailing Address: PO BOX 822
City: CAPE GIRARDEAU State: MO Zip Code: 63701
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JO ANN H EMERSON
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 08
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB23.18968
Date of Disbursement: 06 / 16 / 2006
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): THELMA DRAKE FOR CONGRESS
Mailing Address: PO BOX 61480
City: VIRGINIA BEACH State: VA Zip Code: 23466
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: THELMA DRAKE
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 02
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: SB23.18950
Date of Disbursement: 06 / 06 / 2006
Amount of Each Disbursement this Period: 1900.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **7400.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

A.
Full Name (Last, First, Middle Initial): TIERNEY FOR CONGRESS
Mailing Address: 49 FEDERAL STREET
City: SALEM State: MA Zip Code: 01970
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: JOHN TIERNEY
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MA District: 06
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18974
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): TODD TIAHRT FOR CONGRESS
Mailing Address: 2250 N ROCK ROAD
City: WICHITA State: KS Zip Code: 67226
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: W TODD TIAHRT
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: KS District: 04
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.19211
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): TOM DAVIS FOR CONGRESS
Mailing Address: 6429 DOWNING COURT
City: ANNANDALE State: VA Zip Code: 22003
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: THOMAS M DAVIS
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 11
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18955
Date of Disbursement: 06 / 06 / 2006
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 seperate 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

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

A.
Full Name (Last, First, Middle Initial): TOM KEAN FOR US SENATE
Mailing Address: PO BOX 225
City: COLONIA State: NJ Zip Code: 07067
Purpose of Disbursement: 2006 GENERAL
Candidate Name: THOMAS H JR KEAN
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: NJ District: 00
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.18993
Date of Disbursement: 06 / 22 / 2006
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): TOM UDALL FOR US ALL
Mailing Address: PO BOX 208
City: SANTA FE State: NM Zip Code: 87504
Purpose of Disbursement: 2006 GENERAL
Candidate Name: TOM UDALL
Category/Type: 012
Office Sought: [X] House [ ] Senate [ ] President
State: NM District: 03
Disbursement For: 2006 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.19215
Date of Disbursement: 06 / 29 / 2006
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): UPTON FOR ALL OF US COMMITTEE
Mailing Address: PO BOX 490
City: ST. JOSEPH State: MI Zip Code: 49085
Purpose of Disbursement: 2006 PRIMARY
Candidate Name: FREDERICK STEPHEN UPTON
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 06
Disbursement For: 2006 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB23.18981
Date of Disbursement: 06 / 19 / 2006
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate 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

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

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

Mailing Address PO BOX 1091

City HOOD RIVER State OR Zip Code 97031

Purpose of Disbursement
2006 GENERAL

Candidate Name
GREGORY PAUL WALDEN

Category/Type: 011

Office Sought: [X] House [ ] Senate [ ] President
State: OR District: 02

Disbursement For: 2006
[ ] Primary [X] General
[ ] Other (specify) ▼

Transaction ID: SB23.18957
Date of Disbursement
MM 06 / DD 16 / YYYY 2006

Amount of Each Disbursement this Period
3000.00

B.
Full Name (Last, First, Middle Initial)
WELDON VICTORY COMMITTEE

Mailing Address PO BOX 1992

City MEDIA State PA Zip Code 19063

Purpose of Disbursement
2006 GENERAL

Candidate Name
W CURTIS WELDON

Category/Type: 011

Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 07

Disbursement For: 2006
[ ] Primary [X] General
[ ] Other (specify) ▼

Transaction ID: SB23.18972
Date of Disbursement
MM 06 / DD 26 / YYYY 2006

Amount of Each Disbursement this Period
5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8000.00**

TOTAL This Period (last page this line number only) ..... ▶ **181400.00**