23038224882

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER
2003 OCT 20 A 9:48
Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12PE4M5

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

ADDRESS (number and street) ▼ 7350 VAN DUSEN ROAD SUITE 450

Check if different than previously reported. (ACC)

LAUREL — CITY ▲ — MD — STATE ▲ — 20707 — ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C00238204

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)
- [X] October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

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

Election on ____ in the State of ____

(d) 30-Day POST-Election Report for the: [ ] General (30G) [ ] Runoff (30R) Special (30S)

Election on ____ in the State of ____

5. Covering Period 07 01 2003 through 09 30 2003

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

Type or Print Name of Treasurer PARVEZ SHAH, M.D.

Signature of Treasurer (X) [signature] Date (X) 10 14 2003

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

Office Use Only							

FEC FORM 3X (Rev. 02/2003)

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

Report Covering the Period: From: 07 01 2003 To: 09 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1, 2003		6,153.36
(b) Cash on Hand at Beginning of Reporting Period	5395.77	
(c) Total Receipts (from Line 19)	8001.42	13,302.07
(d) Subtotal (add Lines 5(b) and 5(c) for Column A and Lines 5(a) and 5(c) for Column B)	13397.19	19,455.43
7. Total Disbursements (from Line 31)	7780.58	13,838.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5616.61	5,616.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

23038224884

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PARISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

Report Covering the Period: From: 07 01 2003 To: 09 30 2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (see Schedule A)	8,000.00	
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	8,000.00	13,300.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	8,000.00	13,300.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	1.42	2.07
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	8,001.42	13,302.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	8,001.42	13,302.07

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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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	1,780.58	7,838.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	1,780.58	7,838.82
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00	6,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely with Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7,780.58	13,838.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	7,780.58	13,838.82

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(c), page 3)	8000.00	13,300.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8,000.00	13,300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1,780.58	7,838.82
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	1,780.58	7,838.82

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

PAGE 1 OF 13

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): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): RAUF, ABDUR
Mailing Address: 851 WEYBRIDGE
City: SPRINGFIELD State: OH Zip Code: 45503
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 09 05 2003
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): SAEED, AHMAD
Mailing Address: 1330 SYCAMORE ST, STE 2
City: KINGMAN State: AZ Zip Code: 86401
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 200.00
Date of Receipt: 09 30 2003
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): AZEEM, ASIF
Mailing Address: 5505 FOREST BEND DR SE
City: ADA State: MI Zip Code: 49301
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 200.00
Date of Receipt: 09 05 2003
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

23038224888

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

PAGE 2 OF 13

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NAME OF COMMITTEE (In Full): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): ZUBAIR, FARHAT
Mailing Address: 9844 PANGBORN AVE
City: DOWNEY State: CA Zip Code: 90240
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 09 30 2003
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): KIDWAI, FAROOK J.
Mailing Address: 5141 MOUNTAIN RIDGE DR
City: ADA State: MI Zip Code: 49301
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): BUKHARI, HASSAN I
Mailing Address: 9 VALLEY BROOK DR
City: BRADFORD State: PA Zip Code: 16702
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 2800.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 2200.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2400.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 3 OF 13
[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): QAYYUM, IJAZ
Mailing Address: 820 LAKEVIEW LN
City: BURR RIDGE State: IL Zip Code: 60527
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 10000
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 10000

B.
Full Name (Last, First, Middle Initial): ALVI, ILTIFAT
Mailing Address: 133 TOMLIN CR
City: B BRIDGE State: IL Zip Code: 60521
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 10000
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 10000

C.
Full Name (Last, First, Middle Initial): HAQ, IMAM UL
Mailing Address: 100 GRANDVIEW TERR
City: STATEN ISLAND State: NY Zip Code: 10308
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 10000
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 10000

SUBTOTAL of Receipts This Page (optional) ▶ 30000

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 4 OF 13
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): KHAN, JAMAL H.
Mailing Address: 1 PORT VIEW DR
City: CHARLESTOWN State: NH Zip Code: 2531
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 09 02 2003
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): KHATAK, KIMAT
Mailing Address: 10 HOSPITAL DR
City: HOLYOKE State: MA Zip Code: 01040
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 200.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): RIAZ, M.A
Mailing Address: 126 LADUE FARM RD
City: ST. LOUIS State: MO Zip Code: 63141
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date:
Date of Receipt: 09 05 2003
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

23038224891

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 OF 13

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

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NAME OF COMMITTEE (In Full): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): KHAN, M YOUSAF
Mailing Address: 9587 E KIMBERLY WAY
City: SCOTTSDALE State: AZ Zip Code: 85255
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100 00
Date of Receipt: 09 05 2003
Amount of Each Receipt this Period: 100 00

B.
Full Name (Last, First, Middle Initial): ISLAM, MAHTABEEN
Mailing Address: 7320 FRIARTON CIR.
City: TOLEDO State: OH Zip Code: 43617
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): Dues
Aggregate Year-to-Date: 100 00
Date of Receipt: 09 28 2003
Amount of Each Receipt this Period: 100 00

C.
Full Name (Last, First, Middle Initial): REHMAN, MALIK
Mailing Address: 2717 HAMMONDS FERRY RD
City: BALTIMORE State: MD Zip Code: 21227
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): Dues
Aggregate Year-to-Date: 100 00
Date of Receipt: 09 05 2003
Amount of Each Receipt this Period: 100 00

SUBTOTAL of Receipts This Page (optional) ▶ 300 00

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

23038224892

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial) ARAIN, MOHAMMED
Mailing Address 506 SAUKRATH
City OAK BROOK State IL Zip Code 60523
FEC ID number of contributing federal political committee C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

B.
Full Name (Last, First, Middle Initial) JAN, MUJEEB
Mailing Address 817 16TH ST
City CLARKSTON State WA Zip Code 99403
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

C.
Full Name (Last, First, Middle Initial) KAZI, NADEEM A
Mailing Address 11256 AUTUMNWOOD DR
City CASA GRANDE State AZ Zip Code 85222
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 7 OF 13
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial) QAZI, NAEEM
Mailing Address 706 TANAGER DR
City BLUEFIELD State VA Zip Code 24605
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

B.
Full Name (Last, First, Middle Initial) HILAL, NAHEED
Mailing Address 3081 W. FIVE MILE RD
City ALLEGANY State NY Zip Code 14706
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 1000.00
Date of Receipt 09 05 2003
Amount of Each Receipt this Period 1000.00

C.
Full Name (Last, First, Middle Initial) SHAH, PERVAZ
Mailing Address 7360 VAN DUSEN, # 450
City LAUREL State MD Zip Code 20707
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 200.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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

23038224894

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

PAGE 8 OF 13

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NAME OF COMMITTEE (In Full): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): BAJWA, QASIM
Mailing Address: 104 COUNTRY CREEK CT
City: BALLWIN State: MO Zip Code: 63011
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 30000
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 30000

B.
Full Name (Last, First, Middle Initial): RAHMAN, RAFIQ
Mailing Address: 400 BRIARWOOD CIR.
City: ELIZABETHTOWN State: KY Zip Code: 42701
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 10000
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): HASSAN, RAZA
Mailing Address: 105 STONEWAY RD
City: WAKEFIELD State: RI Zip Code: 02879
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date:
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

23038224895

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 9 OF 13

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

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NAME OF COMMITTEE (In Full): PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): KHAN, SAEED
Mailing Address: 205 BAILEY LN
City: BENTON State: IL Zip Code: 62812
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 200.00

B.
Full Name (Last, First, Middle Initial): YOUSUF, SHAHID
Mailing Address: 3084 WOODCREEK WAY
City: BLOOMFIELD State: MI Zip Code: 48304
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): ANWAR, SHAMSHAD
Mailing Address: 3820 GRATIOT AVE
City: PORT HURON State: MI Zip Code: 48060
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 09 30 2003
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

23038224896

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

PAGE 10 OF 13

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): CHOUDHRY, SULTAN
Mailing Address: 7360 VAN DUSEN, # 450
City: LAUREL State: MD Zip Code: 20707
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): ALI, SYED B
Mailing Address: 105 CHATEAU LATOUR
City: KENNER State: LA Zip Code: 70065
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 100.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): ABIDI, SYED E
Mailing Address: 9 TIMBERWOOD CT
City: HUNT VALLEY State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DUES
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 28 2003
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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

FEC Schedule A (Form 3X) (Revised 1/01)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial) BUKHARI, SYED R
Mailing Address 534 SPRAUL RD
City VILLANOVA State PA Zip Code 19085
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 400.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 400.00

B.
Full Name (Last, First, Middle Initial) RIZVI, SYED
Mailing Address 18 WYNWOOD DR
City WEST WINDSOR State NJ Zip Code 08550
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

C.
Full Name (Last, First, Middle Initial) KHAN, WALI U
Mailing Address 11310 GRANDVIEW DR
City DADE CITY State FL Zip Code 33525
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date
Date of Receipt 07 30 2003
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 700.00

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

23038224898

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial) AHMAD, ZAHEER G
Mailing Address 5026 W BLOOMFIELD LAKE RD
City WEST BLOOMFIELD State MI Zip Code 48323
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

B.
Full Name (Last, First, Middle Initial) ALI, ZULFIQAR
Mailing Address 1900 MOWRY AVE, #105
City FREMONT State CA Zip Code 94538
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 200.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

C.
Full Name (Last, First, Middle Initial) HAQ, IRFAN UL
Mailing Address 19 DUFFIELD DR
City WEST TRENTON State NJ Zip Code 08628
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 07 28 2003
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

FEC Schedule A (Form 3X) (Revised 2/01)

23038224899

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial) BAZ, MALIK
Mailing Address 2765 E WILLOW RIDGE
City CLOVIS State CA Zip Code 93611
FEC ID number of contributing federal political committee. C
Name of Employer SELF-EMPLOYED
Occupation PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify) DUES
Aggregate Year-to-Date 100.00
Date of Receipt 09 / 05 / 2003
Amount of Each Receipt this Period 100.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
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
Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
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
Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 100.00
TOTAL This Period (last page this line number only) 8,000.00

23038224900

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

PAGE 1 OF 1

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NAME OF COMMITTEE (in Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): SMITH BARNEY
Mailing Address: 200 CRESCENT CT
City: DALLAS State: TX Zip Code: 7520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [X] Other (specify): DIVIDENDS
Aggregate Year-to-Date: 207
Date of Receipt: 09 / 30 / 2003
Amount of Each Receipt this Period: 1.42

B.
Full Name (Last, First, Middle initial):
Mailing Address:
City: State: Zip Code:
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:
Date of Receipt: / /
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
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:
Date of Receipt: / /
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 1.42

TOTAL This Period (last page this line number only) ▶ 1.42

23038224901

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): MANSOR A [illegible] INC
Mailing Address: [illegible] NEW HAMPSHIRE AVE NW
City: [illegible] State: DC Zip Code: 20015
Purpose of Disbursement: Accounting Fee
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 05 2004
Amount of Each Disbursement This Period: 312 50

B.
Full Name (Last, First, Middle Initial): A M C T
Mailing Address: 601 12th Street S.
City: Arlington State: VA Zip Code: 22206
Purpose of Disbursement: Telephone
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 [illegible] 2004
Amount of Each Disbursement This Period: 57 54

C.
Full Name (Last, First, Middle Initial): A M C
Mailing Address: 601 12th Street S
City: Arlington State: VA Zip Code: 22206
Purpose of Disbursement: Telephone
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 [illegible] 2004
Amount of Each Disbursement This Period: 27 46

SUBTOTAL of Disbursements This Page (optional) ▶ 397 50

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

23038224902

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): VERIZON
Mailing Address: P O BOX 17577
City: BALTIMORE State: MD Zip Code: 21297
Purpose of Disbursement: Telephone
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 11 2003
Amount of Each Disbursement this Period: 1127

B.
Full Name (Last, First, Middle Initial): VERIZON
Mailing Address: P O BOX 17577
City: BALTIMORE State: MD Zip Code: 21297
Purpose of Disbursement: Telephone
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 05 2003
Amount of Each Disbursement this Period: 1142

C.
Full Name (Last, First, Middle Initial): HUTCHINSON, JOAN
Mailing Address: P O BOX 14044
City: SILVER SPRING State: MD Zip Code: 20911
Purpose of Disbursement: Secretarial Services
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 05 2003
Amount of Each Disbursement this Period: 770.00

SUBTOTAL of Disbursements This Page (optional) ▶ 2968.08

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): BUTT, ZAHID
Mailing Address: 8980 FURLOW AVE
City: ELLICOTT CITY State: MD Zip Code: 21042
Purpose of Disbursement: Reimburse, Travel expenses
Category/Type: 001
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: 07 / 31 / 2003
Amount of Each Disbursement this Period: 385.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: / /
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Date of Disbursement: / /
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 385.00

TOTAL This Period (last page this line number only) ▶ 1780.58

23038224904

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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

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NAME OF COMMITTEE (In Full)
PAKISTANI AMERICAN PHYSICIANS PUBLIC AFFAIRS COMMITTEE

A.
Full Name (Last, First, Middle Initial): SIMMONS, ROBERT
Mailing Address: 215 CANNON HOUSE OFFICE BLDG
City: WASHINGTON. State: DC Zip Code: 20515
Purpose of Disbursement: FUND RAISING
Candidate Name: ROBERT SIMMONS
Office Sought: ☒ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▼ contribution
Category/Type:
Date of Disbursement: 07 / 01 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): CUMMINGS, ELIJAH
Mailing Address: 1010 PARK AVE, SUITE 105
City: BALTIMORE State: MD Zip Code: 20515
Purpose of Disbursement: Fund raising
Candidate Name: ELIJAH CUMMINGS
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 7TH
Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▼ CONTRIBUTION
Category/Type:
Date of Disbursement: 07 / 31 / 2003
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Category/Type:
Date of Disbursement: / /
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶ 6000.00

23038224905

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☑	First Class Mail	POSTMARKED 10/17/03
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER — DATE PREPARED 10/20/03

(6/2000)