REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

AUG 3 3 40 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Pakistani American Physicians Public Affairs Committee

ADDRESS (number and street) [X] Check if different than previously reported
new address
Southridge Lane

CITY, STATE and ZIP CODE
Cromwell Ct 06416

2. FEC IDENTIFICATION NUMBER
C-00-238-204

3. [ ] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year End Report
[X] July 31 Mid Year Report (Non-election Year Only)
[ ] Termination Report

Monthly Report Due On:

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

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____.

[ ] Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period January 1 through June 30, 1997		
6. (a) Cash on Hand January 1, 1997		$ 12,819.62
(b) Cash on Hand at Beginning of Reporting Period	$ 12,819.62	
(c) Total Receipts (from Line 19)	$ 14,738.15	$ 14,738.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 27,557.77	$ 27,557.77
7. Total Disbursements (from Line 30)	$ 9618.34	$ 9618.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 17,939.43	$ 17,939.43
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ Ø	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ Ø	

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

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

Type or Print Name of Treasurer
Arif A. A. Toor MD

Signature of Treasurer

Date
7/14/97

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

FEC FORM 3X
(revised 9/93)

FE6AN135

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

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM TO:

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	14550.00	14550.00	11(a)(i)
ii. Unitemized	0	0	11(a)(ii)
iii. Total (add i and ii) ➤	14550.00	14550.00	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a iii, b and c) ➤	14550.00	14550.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	188.15	188.15	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	14,738.15	14738.15	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	14,738.15	14738.15	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	9618.34	9618.34	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	9618.34	9618.34	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	0	0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	9618.34	9618.34	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	9618.34	9618.34	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	14550.00	14550.00	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	14550.00	14550.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	9618.34	9618.34	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	9618.34	9618.34	37

FE8AA068

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

Pakistani American Physicians Public Affairs Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Bates Rt 2 Box 85 Homedale ID 83628	Consulting fee Disbursement for: [ ] Primary [ ] General [X] Other (specify)	1.6.97	1098.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kimberly Sweeney 55 Country Lane Meriden CT 06451	Book Keeping - Mailing Disbursement for: [ ] Primary [ ] General [X] Other (specify)	1.1.97	113.95
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kimberly Sweeney 55 Country Lane Meriden CT 06451	Bookkeeping - Mailing Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.22.97	123.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express P.O Box 1140 Memphis TN 38101	Express Mail Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.16.97	54.50
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Town + Country Office Services Karen Shoaton 1792 SE Hamilton Roseburg OR 97470	Office Services Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.16.97	390.44
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brinda Larson P.O. Box 1264 Winston OR 97496	Secretarial Services Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.16.97	60.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nasim Ashraf MD 311 W Umpqua Roseburg OR 97470	Bulk Mailing Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.16.97	93.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mid Oregon Printing P.O. Box 1056 Roseburg OR 97470	Printing Services Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.16.97	69.85
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Bates Rt 2 Box 85 Homedale ID 83628	Consulting fee Disbursement for: [ ] Primary [ ] General [X] Other (specify)	2.1.97	1098.00

SUBTOTAL of Disbursements This Page (optional) 3100.74

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

FE6AN069

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

Persistent American Physicians - Public Affairs Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Bates Rt 2 Box 85 Homedale ID 83628	consulting fee Disbursement for: [ ] Primary [ ] General [X] Other (specify)	3.1.97	1098.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kimberly Sweeney 55 Country Lane Meriden CT 06451	Book Keeping Disbursement for: [ ] Primary [ ] General [X] Other (specify)	3.1.97	100.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Jim Bates Rt 2 Box 85 Homedale ID 83628	consulting fee Disbursement for: [ ] Primary [ ] General [X] Other (specify)	4.1.97	1098.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kimberly Sweeney 55 Country Lane Meriden CT 06451	Express mail Book Keeping Disbursement for: [ ] Primary [ ] General [X] Other (specify)	4.1.97	119.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kimberly Sweeney 55 Country Lane Meriden CT 06451	Bookkeeping Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5.1.97	200.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kimberly Sweeney 55 Country Lane Meriden CT 06451	Postage Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5.1.97	64.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Nasim Ashraf MD 511 W. Umpqua Roseburg OR 97470	Postage Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5.10.97	61.60
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Soft Edge P.O. Box 460 McLean VA 22101	Computer Software Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5.10.97	1095.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Nasim Ashraf, MD 511 W Umpqua Roseburg OR 97470.	Airfare Jim Bates Breakfast mtg Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5.22.97	500.00

SUBTOTAL of Disbursements This Page (optional) ..... 4335.60.

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

Pakistani American Physicians Public Affairs Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. m+m Printers 629 SE Cass St Roseburg OR 97470	Newsletter Printing / Primary / General / Other (specify)	5.22.97	1800.00
B. Kimberly Sweeney 55 Country Lane Meriden CT 06450	Bookkeeping / Primary / General / Other (specify)	6.1.97	200.00
C. US Senate Restaurant Washington DC.	Breakfast meeting / Primary / General / Other (specify)	6.10.97	182.00
D.	Primary / General / Other (specify)		
E.	Primary / General / Other (specify)		
F.	Primary / General / Other (specify)		
G.	Primary / General / Other (specify)		
H.	Primary / General / Other (specify)		
I.	Primary / General / Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 2182.00

TOTAL This Period (last page this line number only) 9618.34

FE8ANI30

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 8

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

Pakistani American Physicians Public Affairs Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Mohammed Arian MD 506 Sauk Path Oak Brook IL 60521 Receipt For: ☐ Primary ☐ General ☒ Other (specify): Pakistan mtg PAPPAC	Name of Employer: SELF-EMPLOYED Occupation: Physician Aggregate Year-to-Date $ 100.00	12.15.96	100.00
B. Omar / Mehreen Atiq MD 1609 W 40th 203 Pine Bluff AR 71603 Receipt For: ☐ Primary ☐ General ☒ Other (specify): Pak. mtg PAPPAC	Name of Employer: SELF-EMPLOYED Occupation: Physician Aggregate Year-to-Date $ 125.00	12.15.96	125.00
C. Asim Malik 188 Old Westbury Road Old West bury NY 11568 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAPPAC	Name of Employer: Self Occupation: Physician Aggregate Year-to-Date $ 200.00	12.15.96	200.00
D. Mohammed Suleman 14 Guadalupe St Kenner LA 70062 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAPPAC	Name of Employer: Self Occupation: Physician Aggregate Year-to-Date $ 125.00	12.15.96	125.00
E. Musteq Sheikh MD 49 Estates Dr. Elmira NY 14903 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAPAC	Name of Employer: Self Occupation: Physician Aggregate Year-to-Date $ 125.00	12.15.96	125.00
F. Amanullah Khan MD P.O. Box 35161 Dallas TX 75235 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAPPAC	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date $ 125.00	5.18.97	125.00
G. Mohammed Aslam 1118 James St Somerset PA 15501 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAPPAC	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date $ 100.00	5.26.97	100.00

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

FETAN047

CHEDULE A **ITEMIZED RECEIPTS**

for each category on the Detailed Summary Page — FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full): Pakistani American Physician Public Affairs Committee

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Somina Zaidi MD, 3301 Mauvale Rd. NW, Canton Ohio 44718	Self	5.29.97	125.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 125.00		
B. Lubna Menboob, 5099 Monterey Ln, Delray Beach Fl 33484	Self	5.30.97	100.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 100.00		
C. Riaz Chawdhry MD, 465 RT 94 W, Newburgh NY 12550	Self	6.2.97	125.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 125.00		
D. Asim Malik MD, 188 Old Westbury Rd, Old Westbury NY 11568	Self	6.2.97	125.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys		
	Aggregate Year-to-Date > $ 985.00		
E. Kimat G. Khatak MD, 10 Hospital Drive Ste 311, Holyoke MA 0040	Self	6.4.97	125.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 1,250.00		
F. Mohammad Afzal Alain MD, 1019 W Yosemite, Madera CA 93637	Self	6.4.97	125.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys		
	Aggregate Year-to-Date > $ 125.00		
G. Pervez Mussarat MD, 1006 SW Oak Dr Ste 104, Hammond LA 70403	Self	6.5.97	125.00
Receipt For: [X] Other (specify): PAC PAC	Occupation: Phys		
	Aggregate Year-to-Date > $ 25.00		

SUBTOTAL of Receipts This Page (optional) > 850.00

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

FE6ANoee

CHEDULE A **ITEMIZED RECEIPTS**

For each category of the Detailed Summary Page: 3 | 8

FOR LINE NUMBER: 11a

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NAME OF COMMITTEE (In Full): Pakistani American Physicians Public Affairs Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Irfan UL Hua MD, 19 Duffield Drive, West Trenton NJ 08628	Self / Phys.	6.5.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		
B. Mohammad A. Cheema, 13155 Gremoor Dr., Elm Grove WI 53122	Self / Physician	6.6.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		
C. Nasim Ashraf MD, 10a Salix Ct, Roseburg OR 97470	Self / Phys.	6.9.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		
D. M I Shaa Chishti, 6651 Chippewa, St Louis MO 63109	Self / Phys.	6.11.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		
E. Shahnaz Khan, 11310 Grandview Dr, Dade City FL 33525	Self / Phys	6.18.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		
F. Iftikhar Ahmed Chatha, MD, Kenwood Place Site 103, 2500 Highland Rd, Hermitage PA 16148	Self / Phys.	6.24.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		
G. Shaukat Khan, 135 Lafayette Av., Palmerton PA 18071	Self / Phys.	6.25.97	125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAK PAC	Aggregate Year-to-Date $ 125.00		

SUBTOTAL of Receipts This Page (optional) 875.00

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

FE8AN065

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 8

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full): Pakistani American Physicians Public Affairs Committee

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Arif Muslim, 454 River Rd, Newburgh NY 12550	Self	5.7.97	1000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Physician		
	Aggregate Year-to-Date > $ 1000.00		
B. MA MAJEED ODS, 661 S. Second Ave, Covina CA 91723-3538	Self	5.10.97	250.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Physician		
	Aggregate Year-to-Date > $ 250.00		
C. M. Naeem Arshad MD, 133 Chateau St. Michel, Kenner LA 70065	Self	5.11.97	225.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 225.00		
D. S. Sultan Ahmed MD, 40 Creek Terr., Teaneck NJ 07670-2406	Self	5.12.97	225.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 225.00		
E. Waheed/Reena Akbar MDs, 4701 Towne Centre Suite 308-309, Saginaw MI 48604	Self	5.12.97	450.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Phys		
	Aggregate Year-to-Date > $ 450.00		
F. Omar Atiq MD, 1609 W 40th 203, Pine Bluff AR 71603	Self	5.12.97	225.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 350.00		
G. Nadir Mahmood Gondal MD, 14 Rockledge Rd Apt 1A, Hartsdale NY 10530	Self	5.13.97	225.00
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAPPAC	Occupation: Phys.		
	Aggregate Year-to-Date > $ 225.00		

SUBTOTAL of Receipts This Page (optional) 2600.00

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

FE7AN107

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

Pakistani American Physician Public Affairs Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Yousar Zaman MD 2000 N. Village Ave Rockville NY 11570 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 350.00	5.21.97	350.00
B. Full Name, Mailing Address and ZIP Code Javid Anwar MD 5572 Firwilstand Dr. Las Vegas NV 89120 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 225.00	5.21.97	225.00
C. Full Name, Mailing Address and ZIP Code Riazul H. Imami MD 2118 Aaron St Port Charlotte FL 33952 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 225.00	5.22.97	225.00
D. Full Name, Mailing Address and ZIP Code S. Amjad Hussain MD 2836 Manley Rd Maumee OH 43537-9653 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 1000.00	5.22.97	1000.00
E. Full Name, Mailing Address and ZIP Code S. Amjad Hussain 1050 15 AAC Sts Dr St #143 Toledo (Oregon) Ohio 43616 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 250.00	5.22.97	250.00
F. Full Name, Mailing Address and ZIP Code Raskid Ayyub 159 Sampson Ave Albertson NY 11507 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 250.00	5.25.97	250.00
G. Full Name, Mailing Address and ZIP Code Wahid/Raana Akbar MD 500 Golfview Dr. Saginaw MI 48603 Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Name of Employer: Self Occupation: Phys. Aggregate Year-to-Date > $ 1450.00	5.21.97	1000.00

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	

FEBAN066

CHEDULE A **ITEMIZED RECEIPTS**

For each category of the Detailed Summary Page — FOR LINE NUMBER 6 / 8 / 11a

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NAME OF COMMITTEE (In Full)

Pakistani American Physicians Public Affairs Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Durdana Gilani MD, 5605 Burning Tree Dr, La Canada CA 91011	Self / Phys.	5.31.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 225.00		
B. Nk Siddiqui MD, 708 Irwin Ave, Albion MI 49224	Self / Phys.	6.2.97	350.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 350.00		
C. MA Chauhan MD, 1205 Main St, Newport AR 72112	Self / Phys.	6.2.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 225.00		
D. Akram Choudhry, 874-A2 Pompton Ave, Cedar Grove NJ 07009	Self / Phys.	6.4.97	700.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 700.00		
E. Syed Ali MD, 1272 Dearborn Dr, Akron OH 44313	Self / Phys.	6.4.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 225.00		
F. Azmat Iqbal MD, 4 Farmwood Lane, Upper Brookville NY 11545	Self / Phys.	6.5.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 225.00		
G. Mohammad Idrees, 114 Ulrich Lane, Monroeville PA 15146	Self / Physician	6.6.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PacPac	Aggregate Year-to-Date $ 225.00		

SUBTOTAL of Receipts This Page (optional) 2175.00

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

FE5AN068

CHEDULE A **ITEMIZED RECEIPTS**

For each category of the Detailed Summary Page: 7 | 8

FOR LINE NUMBER: 11a

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NAME OF COMMITTEE (In Full): Pakistani American Physicians Public Affairs Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code: M Zafrullah Khan MD, 25 Foxchase Rd, Charleston WV 25304	Name of Employer: Self; Occupation: Phys	6.5.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 225.00		
B. Full Name, Mailing Address and ZIP Code: S.A. Bajwa MD, 46 Harrison Street, Johnson City NY 13790	Name of Employer: Self; Occupation: Phys.	6.6.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 225.00		
C. Full Name, Mailing Address and ZIP Code: Zaheer G Ahmad MD, 20206 Farmington Rd, Livonia MI 48152	Name of Employer: Self; Occupation: Phys	6.7.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 225.00		
D. Full Name, Mailing Address and ZIP Code: Blai Ahmad Mian MD, 310 East Main Street, Somerville NJ 08876	Name of Employer: Self; Occupation: Phys.	6.7.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 225.00		
E. Full Name, Mailing Address and ZIP Code: Abdul Rehman MD, 25 Douglas Road, Staten Island NY 10304	Name of Employer: Self; Occupation: Phys.	6.10.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 225.00		
F. Full Name, Mailing Address and ZIP Code: AG Qureshi MD, 3 Stonewood Ct, Phoenix MD 21131	Name of Employer: Self; Occupation: Phys	6.11.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 225.00		
G. Full Name, Mailing Address and ZIP Code: Mazhar Ghani MD, 895 N. Holly Glen Dr, Long Beach CA 90815	Name of Employer: Self; Occupation: Phys.	6.12.97	250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PAC PAC	Aggregate Year-to-Date $ 250.00		

SUBTOTAL of Receipts This Page (optional) 1600.00

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

FE6AN000

CHEDULE A **ITEMIZED RECEIPTS**

for each category of the Detailed Summary Page

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

Pakistani American Physicians Public Affairs Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code: Hussain G Malik MD, 296 East Brown St, East Stroudsburg PA 18301	Self / Occupation: Phys.	6.16.97	1125.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Aggregate Year-to-Date $ 1125.00		
B. Full Name, Mailing Address and ZIP Code: Mumtaz Lakhani, 137 Powerhouse Rd 3E, Roslyn Heights NY 11577	Self / Occupation: Phys.	6.16.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Aggregate Year-to-Date $ 225.00		
C. Full Name, Mailing Address and ZIP Code: Zeeba Ahsan, 11801 Sheppards Crossing, Clarksville MD 21029	Self / Occupation: Phys.	6.16.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Aggregate Year-to-Date $ 225.00		
D. Full Name, Mailing Address and ZIP Code: Sikander A Durani MD, Ishrat Durani, 6 Country Squire Rd, Saddle River NJ 07458	Self / Occupation: Phys.	6.16.97	200.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Aggregate Year-to-Date $ 200.00		
E. Full Name, Mailing Address and ZIP Code: Arif Toor MD, 29 Park Place, New Britain CT 06052	Self / Occupation: Phys.	6.18.97	225.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Aggregate Year-to-Date $ 225.00		
F. Full Name, Mailing Address and ZIP Code: Mushtaq Sheikh MD, 1865 W Water St, Elmira NY 14905	Self / Occupation: Phys.	6.24.97	250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): PakPac	Aggregate Year-to-Date $ 375.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 2250.00

TOTAL This Period (last page this line number only) 14,550.00

FE5AN086

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☒	Registered/Certified Mail	POSTMARKED 7/31/97
☐	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

JLW
PREPARER

8/4/97
DATE PREPARED

FEC FORM 70-2 (12/92)