

**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
Physical Therapy Political Action Committee

ADDRESS (number and street) 1111 North Fairfax Street
Check if different than previously reported. (ACC) Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00012690

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

4. TYPE OF REPORT (Choose One)	(a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	April 15 Quarterly Report(Q1)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
	July 15 Quarterly Report(Q2)	Apr 20 (M4)	<input checked="" type="checkbox"/> Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)	
	October 15 Quarterly Report(Q3)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)	
	January 31 Quarterly Report(YE)	Convention (12C)	Special (12G)			
	July 31 Mid-Year Report(Non-election Year Only) (MY)	Election on			in the State of	
	Termination Report (TER)	(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 2003 through 06 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 Dave Mason

Signature of Treasurer Electronically Filed by Dave Mason Date 07 16 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)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Physical Therapy Political Action Committee

Report Covering the Period: From: ^M06 ^D01 ^Y2003 To: ^M06 ^D30 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^M ^D		183498.46
(b) Cash on Hand at Beginning of Reporting Period	186866.26	
(c) Total Receipts (from Line 19)	76873.11	208088.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	263739.37	391586.46
7. Total Disbursements (from Line 31)	45775.00	173622.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	217964.37	217964.37
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	

VA

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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Physical Therapy Political Action Committee

Report Covering the Period: From: ^M06 ^D01 ^Y2003 To: ^M06 ^D30 ^Y2003

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)	34712.00	
(ii) Unitemized	42132.50	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	76844.50	207935.82
(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)	76844.50	207935.82
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	26.61	152.18
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))	76873.11	208088.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	76873.11	208088.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	289.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	289.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45775.00	173332.49
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (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))..	45775.00	173622.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	45775.00	173622.09

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	76844.50	207935.82
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	76844.50	207935.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	269.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	269.60

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Olugesin Akande		Date of Receipt M / D / Y 06 / 30 / 2003	
Mailing Address 35048 Bunker Hill		Transaction ID: 0715200319C83016	
City Farmington Hills	State MI	Zip Code 48331-3238	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Ultimate Rehab Services	Occupation Physical Therapist		Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Bruce Anderson		Date of Receipt M / D / Y 06 / 11 / 2003	
Mailing Address 7520 Northwest 12th Street		Transaction ID: 0613200310C82213	
City Plantation	State FL	Zip Code 33313-5822	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Holy Cross Hospital	Occupation Physical Therapist		Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Mark Anderson		Date of Receipt M / D / Y 06 / 24 / 2003	
Mailing Address Mountain Land Rehabilitation 1952 East 7000 South Suite 100		Transaction ID: 0715200318C82772	
City Salt Lake City	State UT	Zip Code 84121-6878	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Mountain Land Rehabilitation	Occupation Physical Therapist		Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00		

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Geert Audens		Date of Receipt M / D / Y 06 / 26 / 2003
Mailing Address 4234 Triland Way		Transaction ID: 0715200319C82984
City	State	Zip Code
Apex	NC	27539-5381
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Avaria PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Drew Bossen		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 4191 Westcott Dr NE		Transaction ID: 0715200319C82823
City	State	Zip Code
Iowa City	IA	52240-7788
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Lynda Brown		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 850 Road 5		Transaction ID: 0715200318C82765
City	State	Zip Code
Powell	WY	82435-8422
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Kathy Brunken		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 137 East 13th Street		Transaction ID: 0715200318C82763
City Casper	State WY	Zip Code 82601-4230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Stephen Campbell		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 2103 Bay Club Dr		Transaction ID: 0715200318C83003
City Arlington	State TX	Zip Code 76013-5207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ramona Casper		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address PO Box 1029		Transaction ID: 061320039C82080
City Barboursville	State KY	Zip Code 40508-5029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Kentucky PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	700.00
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)		PAGE 9 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Geraldine Chambers		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address 9251 38th Ave S		Transaction ID: 0715200319C82996
City Seattle	State WA	Zip Code 98118-4826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Kent Easthill Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) B. Steven Clark		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 2386 Scenic View Drive		Transaction ID: 061320039C82078
City Adel	State IA	Zip Code 50003-8195
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Kimberley Cohee		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 1507 East 8020 South		Transaction ID: 061320039C82082
City Sandy	State UT	Zip Code 84063-6752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Univ of Utah	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 505.00	

SUBTOTAL of Receipts This Page (optional)	425.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Jonathan Cooperman		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 4797 Sherman Rd		Transaction ID: 061320039C82053
City	State	Zip Code
Kent	OH	44240-7054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) B. Gary Darscheid		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address Arizona Sports Physical Therapy 5320 E Shea Blvd		Transaction ID: 061320039C82060
City	State	Zip Code
Scottsdale	AZ	85254-5749
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Arizona Sports Physical Therap	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1030.00	

Full Name (Last, First, Middle Initial) C. Thomas D'Angela		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 5230 Kings Mills Rd		Transaction ID: 0715200319C82822
City	State	Zip Code
Mason	OH	45040-2319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	650.00
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)		PAGE 11 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Cynthia Driskell		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2003
Mailing Address Foothills Physical Therapy 100 Easy Street Suite B		Transaction ID: 0715200318C82710
City	State Zip Code	
Carefree	AZ 85377-5824	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Foothills Physical Therapy	Occupation Physical Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. E Lee Elkins		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2003
Mailing Address 7583 Geist Point Circle		Transaction ID: 0715200318C82627
City	State Zip Code	
Indianapolis	IN 46226-8660	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Methodist Occupational Hl- th Cl	Occupation Physical Therapist Assistant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. David Emerick		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2003
Mailing Address 7970 N Saddle Ridge Court		Transaction ID: 0715200318C82621
City	State Zip Code	
Catlett	VA 20119-1740	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Valley Health Systems	Occupation Physical Therapist Assistant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts TNs Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Patricia Evans		Date of Receipt M / D / Y Y Y Y 06 / 25 / 2003
Mailing Address 180 Winesap Dr		Transaction ID: 0715200319C82833
City Brentwood	State CA	Zip Code 94513-5807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer CA APTA	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Elee Fairhart		Date of Receipt M / D / Y Y Y Y 06 / 25 / 2003
Mailing Address PO Box 9		Transaction ID: 0715200319C82833
City Morton	State WA	Zip Code 98356-0009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Family Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Pauline Fleach		Date of Receipt M / D / Y Y Y Y 06 / 27 / 2003
Mailing Address 1701 N Senata Ave		Transaction ID: 0715200319C82955
City Indianapolis	State IN	Zip Code 46202-5308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Clarian Health	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	850.00
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)		PAGE 13 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Steven Forbush		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 221 1/2 E. 58th Street		Transaction ID: 0715200318C82740
City Savannah	State GA	Zip Code 31405-3427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Michael Fortanasce		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address Fortanasce & Associates 871 Naomi Ave		Transaction ID: 0715200318C82777
City Arcadia	State CA	Zip Code 91007-7502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Fortanasce & Associates	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Gayle Gamett		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address Rockingham Memorial Hospital 235 Cantrell Ave		Transaction ID: 061320039C82054
City Harrisonburg	State VA	Zip Code 22801-5248
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Rockingham Memorial Hospital	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

SUBTOTAL of Receipts This Page (optional)	▶	3550.00
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)		PAGE 14 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Rick Gowenda		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 7913 Creek Bend Drive		Transaction ID: 061320039C82058
City Ypsilanti	State MI	Zip Code 48197-6204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Detroit Medical Center	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) B. Ira Gorman		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 254 Mary Beth Rd		Transaction ID: 061320039C82047
City Evergreen	State CO	Zip Code 80439-4312
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Regis University	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	

Full Name (Last, First, Middle Initial) C. Carla Griffith		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 4422B Catlin Circle		Transaction ID: 0715200318C82720
City Carpinteria	State CA	Zip Code 93013-1638
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SBCH	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00	

SUBTOTAL of Receipts This Page (optional)	▶	650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Jeanine Gunn		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 1213 Lyndon St No 6		Transaction ID: 061320039C82075
City South Pasadena	State CA	Zip Code 91030-3746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Casa Colina Centers for Rehab	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

Full Name (Last, First, Middle Initial) B. Stanley Gusman		Date of Receipt M / D / Y 06 / 26 / 2003
Mailing Address 9080 Kimberly Blvd No. 44		Transaction ID: 0715200319C82863
City Boca Raton	State FL	Zip Code 33434-2842
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Patricia Hageman		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address PO Box 136		Transaction ID: 0715200319C82841
City Ithaca	State NE	Zip Code 68033-0136
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Univ. Nebraska Medical Ctr	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	800.00
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)		PAGE 16 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Diane Hartley		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 413 Monte Cristo Blvd		Transaction ID: 0715200317C82423
City Tierra Verde	State FL	Zip Code 33715-1840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1335.00	

Full Name (Last, First, Middle Initial) B. Connie Hauser		Date of Receipt M / D / Y 06 / 26 / 2003
Mailing Address Kentucky Physical Therapy & Rehab, 105 Liberty St		Transaction ID: 0715200319C82862
City Barboursville	State KY	Zip Code 40806-5029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kentucky Physical Therapy & Re	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) C. Virginia Highlayman		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address PO Box 8467		Transaction ID: 0715200319C82829
City Jackson	State WV	Zip Code 26002-8467
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Four Pines Physical Thera- py	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
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)		PAGE 17 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Paul Hildreth		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 830 Marenga St		Transaction ID: 061320039C82074
City New Orleans	State LA	Zip Code 70115-2753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Justin Hoover		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 830 N Spring Valley Rd.		Transaction ID: 0715200318C82748
City Junction City	State KS	Zip Code 66441-7807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Brands Horn		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 626 Kansas Avenue		Transaction ID: 0715200318C82866
City Chickasha	State OK	Zip Code 73018-5322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1350.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Johanna Jansen		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address Elon University 104 Oakview Drive		Transaction ID: 0715200318C82793
City Elon	State NC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Elon University	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dianne Jewel		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address Virginia Commonwealth University Dept of Physical Therapy		Transaction ID: 0715200318C82793
City Richmond	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Virginia Commonwealth University	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Holly Johnson		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 34 Fern St, Ivy Hill		Transaction ID: 0715200318C82830
City Harlan	State KY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Kentucky PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	850.00
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)		PAGE 10 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. John Johnson		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 2520 Cliffside Lane NW Apt H103		Transaction ID: 0715200318C82722
City Gig Harbor	State WA	Zip Code 98335-1690
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	

Full Name (Last, First, Middle Initial) B. Marilyn Johnson		Date of Receipt M / D / Y 06 / 26 / 2003
Mailing Address 5920 Friars Rd Ste 1D2		Transaction ID: 0715200318C82965
City San Diego	State CA	Zip Code 92108-1077
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Innovative Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Maureen Kawlar		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 6529 N Braeburn Lane		Transaction ID: 061320039C82055
City Glendale	State WI	Zip Code 53209-5323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. John Kemp		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 420 West 4th Street, #200		Transaction ID: 0715200318C82713
City Mishawaka	State IN	Zip Code 46544-1848
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SJRMC	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Colleen Kgin		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address CIMIT 85 Landsdowne St Suite 200		Transaction ID: 061320039C82073
City Cambridge	State MA	Zip Code 02139-4232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer CIMIT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Frederick King		Date of Receipt M / D / Y 06 / 06 / 2003
Mailing Address 2486 Ponderosa N Ste 106		Transaction ID: 061320039C81993
City Camarillo	State CA	Zip Code 93010-2378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	875.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael Land		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address DBA: Dr. Michael Land Physical The Physical Therapy Specialists Inc.,		Transaction ID: 061320039C82056
City	State	Zip Code
Foley	AL	36535-2417
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Physical Therapy Special- ists	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Dannis Langton		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address E&L Associates Physical Therapy 727 Live Oak Drive		Transaction ID: 0715200318C82625
City	State	Zip Code
El Cajon	CA	92020-5633
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer E&L Associates Physical Therap	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jeanne Lavigne		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 270 California Road		Transaction ID: 0715200318C82639
City	State	Zip Code
Yorktown Heights	NY	10568-4508
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	400.00
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)		PAGE 22 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Carole Lewis		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 7032 Winterberry Lane		Transaction ID: 0715200319C82812
City Bethesda	State MD	Zip Code 20817-2060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Martha Lewis		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address PO Box 2305		Transaction ID: 0715200319C82870
City Conway	State SC	Zip Code 29528-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Atlantic Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Kathleen Luedtke-Hoffmann		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 7505 Vista Ridge Court		Transaction ID: 0715200318C827B1
City Garland	State TX	Zip Code 75044-2065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer TIU School Of Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Timothy Lyons		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 332B Whirlaway Rd		Transaction ID: 0715200318C82837
City Dallas	State TX	Zip Code 75229-5840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kathleen Marala		Date of Receipt M / D / Y 06 / 27 / 2003
Mailing Address 256 Whitford Ave		Transaction ID: 0715200318C82853
City Nutley	State NJ	Zip Code 07110-1820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Dana Mandel		Date of Receipt M / D / Y 06 / 05 / 2003
Mailing Address PO Box 369		Transaction ID: 061320039C81931
City King Ferry	State NY	Zip Code 13081-0369
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

SUBTOTAL of Receipts This Page (optional)	▶	1160.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Dana Mandel		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address PD Box 369		Transaction ID: 0715200319C82871
City King Ferry	State NY	Zip Code 13081-0369
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Gregory McCall		Date of Receipt M / D / Y 06 / 13 / 2003
Mailing Address All PRO Physical Therapy 5102 E Fair Drive		Transaction ID: 0715200316C82316
City Littleton	State CO	Zip Code 80121-3414
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer All PRO Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) C. Gregory McCall		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address All PRO Physical Therapy 5102 E Fair Drive		Transaction ID: 0715200317C82508
City Littleton	State CO	Zip Code 80121-3414
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 252.00
Name of Employer All PRO Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 302.00	

SUBTOTAL of Receipts This Page (optional)	552.00
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)		PAGE 25 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Barbara Meizer		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2003
Mailing Address 148 Cas Hills Drive		Transaction ID: 0715200318C82683
City San Antonio	State TX	Zip Code 78213-3322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SW Texas State Univ.	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Pamela Milington		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2003
Mailing Address 3081 S Superior Street		Transaction ID: 0715200318C82684
City Milwaukee	State WI	Zip Code 53207-3063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Zablocki VA Medical Center	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Rodney Miyasaki		Date of Receipt M / D / Y Y Y Y 06 / 24 / 2003
Mailing Address 324 East Holly Circle		Transaction ID: 0715200318C82749
City Sandy	State UT	Zip Code 84070-3438
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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)		PAGE 26 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert Niklewicz		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 1100 Holly Avenue		Transaction ID: 0715200318C82744
City Rohnert Park	State CA	Zip Code 94928-5621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. N. Norman		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 11144 Hillsboro Ave N		Transaction ID: 0715200318C82741
City Champlin	State MN	Zip Code 55316-3128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Michael O'Keley		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 1519 132nd St SE Suite A		Transaction ID: 0715200318C82817
City Everett	State WA	Zip Code 98208-7203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Integrated Rehab Group	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	350.00
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)		PAGE 27 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Lawrence Ohman		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address Inst of PT and Fitness 678 Southway		Transaction ID: 0715200318C82779
City Lewiston	State ID	
Zip Code 83501-3783	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Inst of PT and Fitness	Occupation Physical Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) B. Leslie Parney		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 287 Rosemary Street		Transaction ID: 0715200318C82646
City Needham	State MA	
Zip Code 02494-3256	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer MGH Inst. of High Professional	Occupation Physical Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. David Powers		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address Ultimate Rehab. 1583 Calle Patricia, Ste 200		Transaction ID: 0715200318C82752
City Pacific Palisades	State CA	
Zip Code 90272-1542	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Ultimate Rehab.	Occupation Physical Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Joan Purington		Date of Receipt M / D / Y 06 / 13 / 2003
Mailing Address 8000 Hill Trail North		Transaction ID: 0715200317C82332
City Lake Elmo	State MN	Zip Code 55042-9534
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Nemetro	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) B. Joan Purington		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 8000 Hill Trail North		Transaction ID: 0715200318C82633
City Lake Elmo	State MN	Zip Code 55042-9534
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer Nemetro	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Cheryl Resnik		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 1540 East Alcazar Street CHP 155		Transaction ID: 0715200319C82844
City Los Angeles	State CA	Zip Code 90089-9008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer USC	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	▶	625.00
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)		PAGE 28 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Denise Rice		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 8400 Pine Tree Lane		Transaction ID: 0715200318C82597
City West Palm Beach	State FL	Zip Code 33406-7850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Nancy Roberge		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address PO Box 67280		Transaction ID: 0715200318C82643
City Chestnut Hill	State MA	Zip Code 02467-0003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Chestnut Hill PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) C. Paul Roubel		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 1845 Livarinois		Transaction ID: 0715200318C82564
City Troy	State MI	Zip Code 48063-1731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer PT Specialists	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	875.00
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)		PAGE 30 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Art Schlenkopper		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 522 North Elam Ave Suite103		Transaction ID: 0715200318C82585
City Greensboro	State NC	Zip Code 27403-1100
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Greensboro Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Richard Schurman		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address PO Box 155		Transaction ID: 0715200318C82624
City Mosinee	State WI	Zip Code 54455-0155
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Cindy Schwankler		Date of Receipt M / D / Y 06 / 30 / 2003
Mailing Address Comprehensive Therapy Services 5877 Oberlin Drive		Transaction ID: 0715200318C82985
City San Diego	State CA	Zip Code 92121-1741
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Comprehensive Therapy Services	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Judith Sebing		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 373 Bryce Drive		Transaction ID: 0715200318C82786
City Morgan Hill	State CA	Zip Code 95037-5368
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Good Samaritan Hospital	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jay Segal		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 1537 Bent River Circle		Transaction ID: 0715200318C82821
City Birmingham	State AL	Zip Code 35216-5394
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Ergoscience	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) C. Darlene Sakarak		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 2524 Ashley Ct		Transaction ID: 0715200318C828B4
City Raleigh	State NC	Zip Code 27607-6555
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer UNC Chapel Hill	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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)		PAGE 32 / 52	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert Selin		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 3021 Montavesta Road		Transaction ID: 061320039C82046
City Lexington	State KY	Zip Code 40502-2807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Cain Shuler		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address Inland Empire Physical Therapy 1303 West 6th Street Suite 104		Transaction ID: 0715200318C82568
City Corona	State CA	Zip Code 92882-3196
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Inland Empire Physical Therapy	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Richard Smith		Date of Receipt M / D / Y 06 / 08 / 2003
Mailing Address Missoula Physical Therapy Ctr 1805 Bancroft St		Transaction ID: 061320038C81906
City Missoula	State MT	Zip Code 59801-5781
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Missoula Physical Therapy Ctr	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	850.00
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)		PAGE 33 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Amanda Somers		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address PMB 207 1361-F W Wade Hampton Blvd		Transaction ID: 0715200318C82691
City	State	Zip Code
Greer	SC	29650-1146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Sports Spine & Industrial	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Gary Souza		Date of Receipt M / D / Y 06 / 08 / 2003
Mailing Address 137D Valley Vista Dr Ste 145		Transaction ID: 061320038C81909
City	State	Zip Code
Diamond Bar	CA	91765-3950
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer GMSPT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Laura Stevens		Date of Receipt M / D / Y 06 / 06 / 2003
Mailing Address P O Box 729		Transaction ID: 061320038C81991
City	State	Zip Code
Highland Mills	NY	10530-0729
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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)		PAGE 34 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Michael Suydam		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 14 Ocean Boulevard		Transaction ID: 0715200318C82583
City Point Lookout	State NY	Zip Code 11569-0292
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Andrew Tatom		Date of Receipt M / D / Y 06 / 04 / 2003
Mailing Address 44 Clifton Street		Transaction ID: 061320038C81843
City Lynchburg	State VA	Zip Code 24501-1422
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jon Thomas		Date of Receipt M / D / Y 06 / 23 / 2003
Mailing Address 2801 K St Suite 420		Transaction ID: 0715200318C82583
City Sacramento	State CA	Zip Code 95818-5119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Campus Commons PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
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)		PAGE 35 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Becky Thorp		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 8301 W 53 St		Transaction ID: 0715200318C82703
City Sioux Falls	State SD	Zip Code 57106-1821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Sioux Valley PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

Full Name (Last, First, Middle Initial) B. Timothy Tyler		Date of Receipt M / D / Y 06 / 25 / 2003
Mailing Address 82 Stebbins Avenue		Transaction ID: 0715200318C82829
City Eastchester	State NY	Zip Code 10708-3829
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer PRO Sports PT	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Darcy Umphred		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 1831 Day Drive		Transaction ID: 0715200318C82716
City Camichael	State CA	Zip Code 95608-6008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer UCP	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1800.00
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)		PAGE 36 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Pamela Unger		Date of Receipt M / D / Y 06 / 10 / 2003
Mailing Address 443 Wentz St		Transaction ID: 061320039C82080
City Kutztown	State PA	Zip Code 19530-1033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Center for Advanced Wound Care	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) B. Pamela Unger		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 443 Wentz St		Transaction ID: 0715200318C82569
City Kutztown	State PA	Zip Code 19530-1033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Center for Advanced Wound Care	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. David Valentine		Date of Receipt M / D / Y 06 / 12 / 2003
Mailing Address SCOR 853 Camino De Los Mares #110		Transaction ID: 0613200310C82310
City San Clemente	State CA	Zip Code 92673-2808
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SCOR	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1150.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 / 52	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Erik Van Doorne		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 2323 Pennsylvania Ave 2nd Floor		Transaction ID: 0715200318C82693
City Wilmington	State DE	Zip Code 19806-1332
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) B. Diane Waldner		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 580 Oakstone Gl'n		Transaction ID: 0715200318C82729
City Alpharetta	State GA	Zip Code 30004-4339
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Childrens Healthcare of ATL	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Gary Waters		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 18434 SW 67 Court		Transaction ID: 0715200318C82721
City Pembroke Pines	State FL	Zip Code 33331-4613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 52	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Douglas White		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 191 Blue Hills Parkway		Transaction ID: 0715200318C82730
City Milton	State MA	Zip Code 02186-1535
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Danisa Wise		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 120D Kenwood Ave		Transaction ID: 0715200318C82673
City Duluth	State MN	Zip Code 55811-4139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer College of St. Scholastica	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Patricia Wolfe		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 9 Bamside Lane		Transaction ID: 0715200318C82731
City Sandwich	State MA	Zip Code 02563-2503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cape Cod Health	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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)		PAGE 38 / 52	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Louise Yurko		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 123 Buena Vista		Transaction ID: 0715200318C82724
City Newport	State NC	Zip Code 28570-8119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Carteret PT Associates Inc	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. James Zacharewski		Date of Receipt M / D / Y 06 / 24 / 2003
Mailing Address 47 Fuller Brook Ave		Transaction ID: 0715200318C82667
City Needham	State MA	Zip Code 02492-1226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Newton Wellesley Hospital	Occupation Physical Therapist	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	34712.00

**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)		PAGE 40 / 52	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. SunTrust Bank		Date of Receipt M / D / Y 06 / 30 / 2008
Mailing Address Old Town Branch King Street		Transaction ID: 0715200321C83330
City Alexandria	State VA	Zip Code 22314-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.61
Name of Employer	Occupation	Other Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 152.18	

SUBTOTAL of Receipts This Page (optional)	▶	28.61
TOTAL This Period (last page this line number only)	▶	28.61

**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)				PAGE 41 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Jim Ramstad Volunteer Committee		Transaction ID: D715200322E1192 Date of Disbursement 06 / 25 / 2003	
Mailing Address 8100 Penn Avenue South #1D4		Amount of Each Disbursement this Period 2000.00	
City Bloomington	State MN	Zip Code 55431-	Category/ Type CONTR. TO REP. RAMSTAD, MN-3 (H)
Purpose of Disbursement CONTR. TO REP. RAMSTAD, MN-3 (H)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Earl Pomeroy for Congress		Transaction ID: D715200322E1177 Date of Disbursement 06 / 24 / 2003	
Mailing Address PO Box 75214		Amount of Each Disbursement this Period 2500.00	
City Washington	State DC	Zip Code 20013-5214	Category/ Type CONTR. TO REP. ROMEROY, ND (H)
Purpose of Disbursement CONTR. TO REP. ROMEROY, ND (H)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 Primary X General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Johnson for Congress		Transaction ID: D715200322E1178 Date of Disbursement 06 / 05 / 2003	
Mailing Address P.O. Box 1888		Amount of Each Disbursement this Period 1000.00	
City New Britain	State CT	Zip Code 06050-	Category/ Type CONTR. TO REP. N. JOHNSON, CT-5 (H)
Purpose of Disbursement CONTR. TO REP. N. JOHNSON, CT-5 (H)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 42 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Becerra for Congress Committee		Transaction ID: D715200322E1188 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 116			
City Hyattsville	State MD	Zip Code 20781-0116	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. BECERRA, CA-31 (H)		Category/ Type	CONTR. TO REP. BECERRA, CA-31 (H)
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Ron Lewis for Congress		Transaction ID: D715200322E1188 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 307			
City Elizabethtown	State KY	Zip Code 42702-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. RON LEWIS, KY-2 (H)		Category/ Type	CONTR. TO REP. RON LEWIS, KY-2 (H)
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. National Republican Congressional Cte.		Transaction ID: D715200322E1176 Date of Disbursement 06 / 11 / 2003	
Mailing Address 320 First Street, SE			
City Washington	State DC	Zip Code 20003-	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement PARTY CONTRIBUTION		Category/ Type	PARTY CONTRIBUTION
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 43 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Cubin for Congress		Transaction ID: D715200322E12D5 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 4657			
City Casper	State WY	Zip Code 82604-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. CUBIN, WY (H)		Category/ Type	
Candidate Name			CONTR. TO REP. CUBIN, WY (H)
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Ted Strickland for Congress		Transaction ID: D715200322E11B5 Date of Disbursement 06 / 25 / 2003	
Mailing Address 320 North Market			
City Lisbon	State OH	Zip Code 44432-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. STRICKLAND, OH-6 (H)		Category/ Type	
Candidate Name			CONTR. TO REP. STRICKLAND, OH-6 (H)
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Grassley Committee		Transaction ID: D715200322E11B0 Date of Disbursement 06 / 25 / 2003	
Mailing Address 5327 Holmes Run Pky.			
City Alexandria	State VA	Zip Code 22304-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO SEN. GRASSLEY, IA (S)		Category/ Type	
Candidate Name			CONTR. TO SEN. GRASSLEY, IA (S)
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 44 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Mike Ross for Congress Committee		Transaction ID: D715200322E1180 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 360			
City Prescott	State AR	Zip Code 71857-	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement CONTR. TO REP. ROSS, AR-4 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	CONTR. TO REP. ROSS, AR-4 (H)	
State: District			

Full Name (Last, First, Middle Initial) B. Langevin for Congress		Transaction ID: D715200322E1183 Date of Disbursement 06 / 25 / 2003	
Mailing Address 301 4th Street, NE			
City Washington	State DC	Zip Code 20002-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. LANGEVIN, RI-2 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	CONTR. TO REP. LANGEVIN, RI-2 (H)	
State: District			

Full Name (Last, First, Middle Initial) C. Ferguson for Congress		Transaction ID: D715200322E1175 Date of Disbursement 06 / 11 / 2003	
Mailing Address P.O. Box 2778			
City Arlington	State VA	Zip Code 22202-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. FERGUSON, NJ-7 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼	CONTR. TO REP. FERGUSON, NJ-7 (H)	
State: District			

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 45 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Wynn for Congress		Transaction ID: D715200322E1193 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 5323			
City Capitol Heights	State MD	Zip Code 20791-	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement CONTR. TO REP. WYNN, MD-4 (H)		Category/ Type	CONTR. TO REP. WYNN, MD-4 (H)
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Heather Wilson for Congress		Transaction ID: D715200322E1179 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 14070			
City Albuquerque	State NM	Zip Code 87101-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. WILSON, NM-1 (H)		Category/ Type	CONTR. TO REP. WILSON, NM-1 (H)
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Boozman for Congress		Transaction ID: D715200322E1186 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 671			
City Rogers	State AR	Zip Code 72757-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. BOOZMAN, AR-3 (H)		Category/ Type	CONTR. TO REP. BOOZMAN, AR-3 (H)
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 46 / 52	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Gerlach for Congress		Transaction ID: D715200322E12D2 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 2776			
City Arlington	State VA	Zip Code 22202-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. GERLACH, PA-6 (H)		Category/ Type	
Candidate Name			CONTR. TO REP. GERLACH, PA-6 (H)
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Lincoln Davis for Congress		Transaction ID: D715200322E1198 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 350			
City Jamestown	State TN	Zip Code 38556-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. DAVIS, TN-4 (H)		Category/ Type	
Candidate Name			CONTR. TO REP. DAVIS, TN-4 (H)
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Thousands of S. Dakotan for Bill Jankl		Transaction ID: D715200322E1200 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 1151			
City Pierre	State SD	Zip Code 57501-	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement CONTR. TO REP. JANKLOW, SD (H)		Category/ Type	
Candidate Name			CONTR. TO REP. JANKLOW, SD (H)
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 47 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Chris Chocola for Congress		Transaction ID: D715200322E12D3 Date of Disbursement 06 / 30 / 2003	
Mailing Address P.O. Box 2776			
City Arlington	State VA	Zip Code 22202-	Amount of Each Disbursement this Period 2500.00 CONTR. TO REP. CHOCOLA, IN-2 (H)
Purpose of Disbursement CONTR. TO REP. CHOCOLA, IN-2 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Mike Rogers for Congress		Transaction ID: D715200322E1197 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.o. Box 1113			
City Anniston	State AL	Zip Code 36202-	Amount of Each Disbursement this Period 2000.00 CONTR. TO REP. ROGERS, AL- 3 (H)
Purpose of Disbursement CONTR. TO REP. ROGERS, AL-3 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. David Scott for Congress		Transaction ID: D715200322E1199 Date of Disbursement 06 / 25 / 2003	
Mailing Address 499 S. Capitol Street, SW # 103			
City Washington	State DC	Zip Code 20003-	Amount of Each Disbursement this Period 1000.00 CONTR. TO REP. SCOTT, GA- 13 (H)
Purpose of Disbursement CONTR. TO REP. SCOTT, GA-13 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 48 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Michaud for Congress		Transaction ID: D715200322E11B7 Date of Disbursement 06 / 25 / 2003	
Mailing Address 499 S. Capitol Street, SW Suite 103		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20003-	Category/ Type CONTR. TO REP. MICHAUD, ME-2 (H)
Purpose of Disbursement CONTR. TO REP. MICHAUD, ME-2 (H)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. A Lot People Supporting Tom Daschle		Transaction ID: D715200322E12D4 Date of Disbursement 06 / 25 / 2003	
Mailing Address 424 C Street, NE First Floor		Amount of Each Disbursement this Period 2500.00	
City Washington	State DC	Zip Code 20002-	Category/ Type CONTR. TO SEN. DASCHLE, SD (S)
Purpose of Disbursement CONTR. TO SEN. DASCHLE, SD (S)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Simmons for Congress		Transaction ID: D715200322E1194 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 2778		Amount of Each Disbursement this Period 1000.00	
City Arlington	State VA	Zip Code 22202-	Category/ Type CONTR. TO REP. SIMMONS, CT-2 (H)
Purpose of Disbursement CONTR. TO REP. SIMMONS, CT-2 (H)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 48 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends of Dennis Cardoza		Transaction ID: D715200322E1191 Date of Disbursement 06 / 25 / 2003	
Mailing Address 499 S. Capitol Street, SW Suite 103		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20003-	Category/ Type CONTR. TO REP. CARDOZA, CA-18 (H)
Purpose of Disbursement CONTR. TO REP. CARDOZA, CA-18 (H)		Candidate Name	
Office Sought: House Senate President State: District			
Disbursement For: 2004 X Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Bullfeathers		Transaction ID: D715200322E1174 Date of Disbursement 06 / 24 / 2003	
Mailing Address 400 First Street SE		Amount of Each Disbursement this Period 275.00	
City Washington	State DC	Zip Code 20003-	Category/ Type IN KIND: FOOD FOR REP GER- LACH EVENT PA-6 (H)
Purpose of Disbursement FOOD FOR REP GERLACH EVENT PA-6 (H)		Candidate Name	
Office Sought: House Senate President State: District			
Disbursement For: 2004 X Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Charlie Dent for Congress		Transaction ID: D715200322E1181 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 442		Amount of Each Disbursement this Period 2500.00	
City Allentown	State PA	Zip Code 18105-	Category/ Type CONTR. TO CAND. DENT, PA- 15 (H)
Purpose of Disbursement CONTR. TO CAND. DENT, PA-15 (H)		Candidate Name	
Office Sought: House Senate President State: District			
Disbursement For: 2004 X Primary General Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	▶	3775.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 50 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Citizens for Bunning		Transaction ID: D715200322E1182 Date of Disbursement 06 / 25 / 2003	
Mailing Address 1717 Dixie Hwy. Suite 18D		Amount of Each Disbursement this Period 1000.00	
City Covington	State KY	Zip Code 41011-	Category/ Type CONTR. TO SEN. BUNNING, KY (S)
Purpose of Disbursement CONTR. TO SEN. BUNNING, KY (S)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) B. Friends of Katherine Harris		Transaction ID: D715200322E1184 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 2776		Amount of Each Disbursement this Period 1000.00	
City Arlington	State VA	Zip Code 22202-	Category/ Type CONTR. TO REP. HARRIS, FL- 13 (H)
Purpose of Disbursement CONTR. TO REP. HARRIS, FL-13 (H)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. Wyden for Senate		Transaction ID: D715200322E1185 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 3498		Amount of Each Disbursement this Period 1000.00	
City Portland	State OR	Zip Code 97208-	Category/ Type CONTR. TO SEN. WYDEN, OR (S)
Purpose of Disbursement CONTR. TO SEN. WYDEN, OR (S)		Candidate Name	
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		
State: District			

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 51 / 52			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

Full Name (Last, First, Middle Initial) A. Simpson for Congress		Transaction ID: D7152D0322E1195 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 1541			
City Boise	State ID	Zip Code 83701-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTR. TO REP. SIMPSON, ID-2 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		CONTR. TO REP. SIMPSON, ID-2 (H)
State: District			

Full Name (Last, First, Middle Initial) B. Renzi for Congress		Transaction ID: D7152D0322E12D1 Date of Disbursement 06 / 25 / 2003	
Mailing Address P.O. Box 2776			
City Arlington	State VA	Zip Code 22202-	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement CONTR. TO REP. RENZI, AZ-1 (H)		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼		CONTR. TO REP. RENZI, AZ-1 (H)
State: District			

SUBTOTAL of Disbursements This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	45775.00

