

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Academy of Physician Assistants Political Action Committee (PA PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		65093.19
(b) Cash on Hand at Beginning of Reporting Period.....	65411.84	
(c) Total Receipts (from Line 19)	7275.00	49967.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	72686.84	115060.19
7. Total Disbursements (from Line 31).....	0.00	42373.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	72686.84	72686.84
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	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

American Academy of Physician Assistants Political Action Committee (PA PAC)

Report Covering the Period: From: / / To: / /

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).....	4115.00	11459.00
(ii) Unitemized	3160.00	38508.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7275.00	49967.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7275.00	49967.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (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))..... ▶	7275.00	49967.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7275.00	49967.00

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	798.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	798.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	41000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	575.00
(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	575.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	42373.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	42373.35

DETAILED SUMMARY PAGE
of Disbursements

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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)	7275.00	49967.00
34. Total Contribution Refunds (from Line 28(d))	0.00	575.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7275.00	49392.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	798.35
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	798.35

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Vicki Berger
 Full Name (Last, First, Middle Initial)
 Mailing Address 1802 Mohawk Ln
 City Ogden State UT Zip Code 84403-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wee Care Pediatrics Occupation Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : C1833200
 Amount of Each Receipt this Period
 100.00

B. Linda L. Contreras
 Full Name (Last, First, Middle Initial)
 Mailing Address 818 Shallowater Dr
 City Allen State TX Zip Code 75013-4759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PARKLAND HOSPITAL Occupation PA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : C1832406
 Amount of Each Receipt this Period
 200.00

C. Ann Marie Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 14456 Meadow Dr
 City Grass Valley State CA Zip Code 95945-9065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AAPA Occupation Senior Director, State Advocacy and Ou
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : C1832398
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. James Delaney
Full Name (Last, First, Middle Initial)

Mailing Address 818 Shallowater Dr

City State Zip Code
Allen TX 75013-4759

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UT Southwestern Physician Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 03 / 2012
Transaction ID : **C1832405**

Amount of Each Receipt this Period
500.00

B. Kevin A. Duffy
Full Name (Last, First, Middle Initial)

Mailing Address 5952 Shadowlawn Dr

City State Zip Code
East Lansing MI 48823-2341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Michigan Orthopedic Center PA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 03 / 2012
Transaction ID : **C1832399**

Amount of Each Receipt this Period
500.00

c. Brian M. Gallagher
Full Name (Last, First, Middle Initial)

Mailing Address 800 N Jones Rd

City State Zip Code
Essexville MI 48732-8614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Riverview Medical Associates and at Em PA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
10 / 11 / 2012
Transaction ID : **C1845839**

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Lawrence M. Herman MPA, RPA-C
 Full Name (Last, First, Middle Initial)
 Mailing Address 853 Park Ave
 City State Zip Code
 Huntington NY 11743-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 New York Institute of Technology Clinical Coordinator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : C1833204
 Amount of Each Receipt this Period
 500.00

B. Alan Hull PA-C
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 Pheasant Hill Dr
 City State Zip Code
 Portland ME 04103-2783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Maine Spine & Rehabilitation Physical Med Rehab.
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : C1842386
 Amount of Each Receipt this Period
 25.00

C. David I. Jackson PA-C
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Hartland Ave
 City State Zip Code
 Huntington Station NY 11746-2713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Glens Falls Hospital Emergency Medicine
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : C1833208
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional).....▶	925.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Stacey M. Lee
Full Name (Last, First, Middle Initial)

Mailing Address 500 Sandridge Rd

City Charlotte State NC Zip Code 28210-2453

FEC ID number of contributing federal political committee. **C**

Name of Employer Carolina Digestive Health Occupation PA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : C1832431

Amount of Each Receipt this Period
 140.00

B. Melinda Moore
Full Name (Last, First, Middle Initial)

Mailing Address 18101 Point Lookout Dr Apt 424

City Houston State TX Zip Code 77058-3771

FEC ID number of contributing federal political committee. **C**

Name of Employer Space City Pain Specialist Occupation PA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : C1842397

Amount of Each Receipt this Period
 100.00

C. Josanne K. Pagel MPAS, PA-C
Full Name (Last, First, Middle Initial)

Mailing Address 35206 Chestnut Ridge Rd

City North Ridgeville State OH Zip Code 44039-3916

FEC ID number of contributing federal political committee. **C**

Name of Employer The Cleveland Clinic Occupation Physician Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : C1832397

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	490.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. JP Thompson PA-C
 Full Name (Last, First, Middle Initial)
 Mailing Address 28821 Chardon Rd
 City Willoughby Hills State OH Zip Code 44092-2613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cleveland Clinic Foundation Occupation Surg: Vascular
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 03 / 2012
Transaction ID : C1832402
 Amount of Each Receipt this Period 100.00

B. Robert L. Wooten PA-C
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 Kenneth Rd
 City Greensboro State NC Zip Code 27455-2514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Forsyth Emergency Service Occupation PA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 11 / 2012
Transaction ID : C1845835
 Amount of Each Receipt this Period 500.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	4115.00