

**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
 Advanced Medical Technology Assn PAC (AdvaMed PAC)

ADDRESS (number and street) 1200 G STREET NW - SUITE 400
 Check if different than previously reported. (ACC) WASHINGTON DC 20005

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

C00340356

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

4. TYPE OF REPORT (Choose One)
 (a) Quarterly Reports:
 April 15 Quarterly Report(Q1) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 July 15 Quarterly Report(Q2) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 October 15 Quarterly Report(Q3) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
 X January 31 Quarterly Report(YE) Election on in the State of
 July 31 Mid-Year Report(Non-election Year Only) (MY) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Termination Report (TER) Election on in the State of (d) 30-Day Post -Election Report for the: Convention (12C) Special (12G) General (30G) Runoff (30R) Special (30B)

5. Covering Period 07 01 2001 through 12 31 2001

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 Ms Kristen M. Bogenrief

Signature of Treasurer Electronically Filed by Ms Kristen M. Bogenrief Date 01 31 2001

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
(Revised 1/2001)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Report Covering the Period: From: ^h07 ^d01 ^y2001 To: ^h12 ^d31 ^y2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^y 2001		8607.76
(b) Cash on Hand at Beginning of Reporting Period	29395.45	
(c) Total Receipts (from Line 19)	11403.56	67465.36
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40799.01	76073.12
7. Total Disbursements (from Line 30)	24710.86	59984.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	16088.15	16088.15
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**

FEC Form 3X (Revised 1/2001)

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Write or Type Committee Name

Advanced Medical Technology Assn PAC (AdvaMed PAC)

Report Covering the Period: From: ^{MM}07 ^{DD}01 ^{YYYY}2001 To: ^{MM}12 ^{DD}31 ^{YYYY}2001

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)	3901.70	
(ii) Unitemized	232.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4133.70	52695.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	6500.00	14000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	10633.70	66695.50
12. Transfers From Affiliated/Other Party Committees	769.86	769.86
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 36, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	11403.56	67465.36
20. Total Federal Receipts (subtract Line 18 from Line 19)	11403.56	67465.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

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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.....	1210.86	1210.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1210.86	1210.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23500.00	59774.11
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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	24710.86	59984.97
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	24710.86	59984.97
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	10633.70	66695.50
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	10633.70	66695.50
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	1210.86	1210.86
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	1210.86	1210.86

**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 5 / 17	
	<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)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial)
A. Pamela Bailey

Mailing Address
5208 Lawn Way
City State Zip Code
Chevy Chase MD 20815

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
999.98

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HIMA President

Payroll Deduction, 169.67
BiMonthly

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 2000.00

Transaction ID: SA11A1.4841

Full Name (Last, First, Middle Initial)
B. Carey Boklan

Mailing Address
2109 O'Toole Avenue #M
City State Zip Code
San Jose CA 95131

Date of Receipt
N M / D E / Y Y Y Y
12 / 20 / 2001

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HDC Corporation President and COO

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General Other (specify) ▼ 1000.00

Transaction ID: SA11A1.4763

Full Name (Last, First, Middle Initial)
C. Ms Theresa Gastis

Mailing Address
1209 Deerfield Parkway
City State Zip Code
Buffalo Grove IL 60089

Date of Receipt
N M / D E / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
120.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AdvaMed Associate Vice President

Payroll Deduction, BiMonthly \$20.00

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 240.00

Transaction ID: SA11A1.4847

SUBTOTAL of Receipts This Page (optional) ▶ **1619.98**

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)

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11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Assn PAC (AdvaMed PAC)

A. Blair Childs

Full Name (Last, First, Middle Initial) _____ Date of Receipt _____
Mailing Address _____ N M / D E / Y Y Y Y
1885 Virginia Ave _____ 12 31 2001
City State Zip Code _____
McLean VA 22101 _____ Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. _____ 545.45

Name of Employer Occupation Payroll Deduction, BiMont-
HIMA Exec. Vice President hly \$80.91

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 985.50

Transaction ID: SA11A1.4843

B. Mary Ploek

Full Name (Last, First, Middle Initial) _____ Date of Receipt _____
Mailing Address _____ N M / D E / Y Y Y Y
108 West Bellefonte Ave _____ 12 31 2001
City State Zip Code _____
Alexandria VA 22301 _____ Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. _____ 249.98

Name of Employer Occupation Payroll Deduction, BiMont-
AdvaMed Vice President hly \$41.67

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 500.00

Transaction ID: SA11A1.4852

C. Nancy Singer

Full Name (Last, First, Middle Initial) _____ Date of Receipt _____
Mailing Address _____ N M / D E / Y Y Y Y
1401 North Oak Street Apt 604 _____ 12 31 2001
City State Zip Code _____
Arlington VA 22209 _____ Amount of Each Receipt this Period _____
FEC ID number of contributing federal political committee. _____ 600.00

Name of Employer Occupation Payroll Deduction, BiMont-
AdvaMed Special Counsel hly \$100.00

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.4846

SUBTOTAL of Receipts This Page (optional) ► **1395.43**

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 / 17

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial)
A. Mr. James Smith Jr.

Mailing Address
7212 Burtonwood

City State Zip Code
Alexandria VA 22307

Date of Receipt
M / D / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
499.96

FEC ID number of contributing federal political committee.

Name of Employer Occupation Payroll Deduction, BiMonthly \$83.34
AdvaMed VP, Federal Government Relations

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 1500.00

Transaction ID: SA11A1.4845

Full Name (Last, First, Middle Initial)
B. Thomas Tremble

Mailing Address
3103 Tremont Ave

City State Zip Code
Cheverly MD 20785

Date of Receipt
M / D / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
136.35

FEC ID number of contributing federal political committee.

Name of Employer Occupation Payroll Deduction, BiMonthly \$22.73
HIMA Director, Govt Affairs

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 250.00

Transaction ID: SA11A1.4844

Full Name (Last, First, Middle Initial)
C. Mr. Frank Wilton

Mailing Address
4052 North 41st Street

City State Zip Code
McLean VA 22101

Date of Receipt
M / D / Y Y Y Y
12 / 31 / 2001

Amount of Each Receipt this Period
249.88

FEC ID number of contributing federal political committee.

Name of Employer Occupation Payroll Deduction, BiMonthly \$41.67
AdvaMed Associate Vice President, Membership

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 500.00

Transaction ID: SA11A1.4849

SUBTOTAL of Receipts This Page (optional)	886.29
TOTAL This Period (last page this line number only)	3901.70

**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)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial)
A. Bayer Corporation PAC

Mailing Address
Bayer Road
City State Zip Code
Pittsburgh PA 15205

Date of Receipt
M / D / Y Y Y Y
07 / 02 / 2001

FEC ID number of contributing federal political committee. C00281162

Amount of Each Receipt this Period 1500.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 1500.00
Other (specify) ▼

Transaction ID: SA11C.4757

Full Name (Last, First, Middle Initial)
B. C.R. Bard

Mailing Address
730 Central Ave.
City State Zip Code
Murray Hill NJ 07974

Date of Receipt
M / D / Y Y Y Y
08 / 16 / 2001

FEC ID number of contributing federal political committee. C00359125

Amount of Each Receipt this Period 5000.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
X Primary General 5000.00
Other (specify) ▼

Transaction ID: SA11C.4759

C.

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	6500.00

**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 9 / 17	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial)
A. AdvaMed

Date of Receipt
M M / D D / Y Y Y Y
12 / 20 / 2001

Mailing Address
1200 G. St. NW #40D

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AdvaMed_reimburs. PAC for Ltrhd. 7/10

Amount of Each Receipt this Period
769.86

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 769.86

Transaction ID: SA12.4862

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	769.86
TOTAL This Period (last page this line number only)	▶	769.86

**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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. Beacon Printing		Date of Disbursement 07 / 10 / 2001	
Mailing Address 2850 Old Washington Road City: Waldorf State: MD Zip Code: 20601-3175		Amount of Each Disbursement this Period 789.86	
Purpose of Disbursement AdvaMed PAC Letterhead Order		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:	Transaction ID: SB21B.4825		

Full Name (Last, First, Middle Initial) B. Ms Hien Truong		Date of Disbursement 11 / 12 / 2001	
Mailing Address 711 N. Nelson St. City: Arlington State: VA Zip Code: 22203		Amount of Each Disbursement this Period 355.00	
Purpose of Disbursement Pd Torricelli Breakfast on personal cc		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:	Transaction ID: SB21B.4835		

C.

SUBTOTAL of Disbursements This Page (optional)	1124.86
TOTAL This Period (last page this line number only)	1124.86

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. BILL THOMAS CAMPAIGN COMMITTEE		Date of Disbursement 10 ^M / 11 ^D / 2001 ^Y
Mailing Address PO BOX 385 City: BAKERSFIELD State: CA Zip Code: 93302		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name BILL THOMAS CAMPAIGN COMMITTEE	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.478B
State: CA District: 22		

Full Name (Last, First, Middle Initial) B. Billy Tauzin Committee		Date of Disbursement 12 ^M / 20 ^D / 2001 ^Y
Mailing Address P.O. Box 1407 City: Thibodaux State: LA Zip Code: 70302		Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement	Candidate Name Billy Tauzin Committee	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.485B
State: LA District: 03		

Full Name (Last, First, Middle Initial) C. CAMPAC		Date of Disbursement 10 ^M / 11 ^D / 2001 ^Y
Mailing Address 600 14th St. #5 City: Washington State: DC Zip Code: 20005		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name CAMPAC	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.478D
State: MI District: 04		

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. Chris Cox Congr Comm		Date of Disbursement 11 / 09 / 2001
Mailing Address 300 First ST., SE City Washington State DC Zip Code 20003 Business Center		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4813
State: CA District: 47		

Full Name (Last, First, Middle Initial) B. Congressman Joe Barton Committee		Date of Disbursement 10 / 22 / 2001
Mailing Address P.O. Box 1444 City Ennis State TX Zip Code 75120		Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4783
State: TX District: 06		

Full Name (Last, First, Middle Initial) C. Diana Degette for Congress		Date of Disbursement 10 / 01 / 2001
Mailing Address P.O. Box 75214 City Washington State DC Zip Code 20013		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4782
State: CO District: 01		

SUBTOTAL of Disbursements This Page (optional)	3500.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. Earl Pomeroy for Congress		Date of Disbursement 10 / 01 / 2001
Mailing Address P.O. Box 75214 City Washington State DC Zip Code 20013		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4778
State: ND District: 00		

Full Name (Last, First, Middle Initial) B. FRIENDS OF JENNIFER B DUNN		Date of Disbursement 10 / 01 / 2001
Mailing Address PO BOX 40110 City BELLEVUE State WA Zip Code 98015		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4775
State: WA District: 08		

Full Name (Last, First, Middle Initial) C. Friends of Jim McDermott		Date of Disbursement 10 / 01 / 2001
Mailing Address 6282 Ocoquan Forest Rd. City Manassas State VA Zip Code 20112		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4784
State: VA District: 07		

SUBTOTAL of Disbursements This Page (optional)	2500.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. Friends of Sam Johnson		Date of Disbursement 10 / 01 / 2001	
Mailing Address P.O. Box 860086 City: Plano State: TX Zip Code: 75086		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4772	
Candidate Name Friends of Sam Johnson		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: TX District: 03			

Full Name (Last, First, Middle Initial) B. Friends of Sherrod Brown		Date of Disbursement 10 / 01 / 2001	
Mailing Address P.O. Box 2884 City: Washinton State: DC Zip Code: 20013		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4776	
Candidate Name Friends of Sherrod Brown		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: OH District: 13			

Full Name (Last, First, Middle Initial) C. John Dingell for Congress Committee		Date of Disbursement 12 / 19 / 2001	
Mailing Address P.O. Box 75214 City: Washington State: DC Zip Code: 20013		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4821	
Candidate Name John Dingell for Congress Committee		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: MI District: 18			

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. NETHERCUTT FOR CONGRESS '2000		Date of Disbursement 10 ^M / 29 ^D / 2001 ^Y	
Mailing Address PO BOX 1925 City: SPOKANE State: WA Zip Code: 99201		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4803	
Candidate Name NETHERCUTT FOR CONGRESS '2000		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: WA District: 05			

Full Name (Last, First, Middle Initial) B. Northup for Congress		Date of Disbursement 12 ^M / 05 ^D / 2001 ^Y	
Mailing Address 4515 W. St. NW City: Washington State: DC Zip Code: 20006		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4819	
Candidate Name Northup for Congress		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: KY District: 03			

Full Name (Last, First, Middle Initial) C. Peter Deutsch for Congress		Date of Disbursement 12 ^M / 04 ^D / 2001 ^Y	
Mailing Address P.O. Box 817689 City: Hollywood State: FL Zip Code: 33081		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4817	
Candidate Name Peter Deutsch for Congress		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: FL District: 20			

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
				<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. PETE STARK RE-ELECTION COMMITTEE		Date of Disbursement 10 / 01 / 2001
Mailing Address PO BOX 8331 City: FREMONT State: CA Zip Code: 94537		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		
Candidate Name PETE STARK RE-ELECTION COMMITTEE		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4786
State: CA District: 13		

Full Name (Last, First, Middle Initial) B. Ryan for Congress Committee		Date of Disbursement 11 / 01 / 2001
Mailing Address 1101 Vermont Ave. NW, #800 Attn: Manuel Bonilla City: Washington State: DC Zip Code: 20006		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		
Candidate Name Ryan for Congress Committee		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4804
State: MD District: 01		

Full Name (Last, First, Middle Initial) C. Stupak for Congress		Date of Disbursement 11 / 06 / 2001
Mailing Address P.O. Box 143 City: Menominee State: MI Zip Code: 49858		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		
Candidate Name Stupak for Congress		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Transaction ID: SB23.4808
State: MI District: 01		

SUBTOTAL of Disbursements This Page (optional)	2500.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 29				

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NAME OF COMMITTEE (In Full)
Advanced Medical Technology Assn PAC (AdvaMed PAC)

Full Name (Last, First, Middle Initial) A. Torricelli for U.S. Senate Inc.		Date of Disbursement 11 / 14 / 2001	
Mailing Address 1300 Connecticut Ave. NW #600 City State Zip Code Washington DC 20036		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement		Transaction ID: SB23.4815	
Candidate Name Torricelli for U.S. Senate Inc.		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: NJ District:			

Full Name (Last, First, Middle Initial) B. TRUST PAC; TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS		Date of Disbursement 07 / 24 / 2001	
Mailing Address PO BOX 221543 City State Zip Code CHANTILLY VA 20151		Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement		Transaction ID: SB23.4806	
Candidate Name		Category/ Type	
Office Sought: House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. VOLUNTEER PAC		Date of Disbursement 10 / 11 / 2001	
Mailing Address P.O. Box 158552 City State Zip Code Nashville TN 27215		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement		Transaction ID: SB23.4787	
Candidate Name VOLUNTEER PAC/ Sen. Frist		Category/ Type	
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: TN District:			

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	23500.00