

**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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ASSOCIATION OF AMERICAN PHYSICIANS AND SURGEONS POLITICAL ACTION COMMITTEE (AAPS-PAC)

Full Name (Last, First, Middle Initial)

A. CHRIS EDWARDS FOR CONGRESS

Mailing Address PO BOX 13105

City LAS VEGAS State NV Zip Code 89112

Purpose of Disbursement

Candidate Name
CHRIS EDWARDS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: NV District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : **SB23.4896**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ANNA LITTLE

Mailing Address PO BOX 382

City HIGHLANDS State NJ Zip Code 07732

Purpose of Disbursement

Candidate Name
FRIENDS OF ANNA LITTLE

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: NJ District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : **SB23.4892**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. JEFF FLAKE FOR US SENATE INC

Mailing Address PO BOX 12512

City TEMPE State AZ Zip Code 85284

Purpose of Disbursement

Candidate Name
JEFF FLAKE FOR US SENATE INC

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : **SB23.4889**

Amount of Each Disbursement this Period

5000.00

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

9000.00

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

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