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

OB-GYNS FOR WOMEN'S HEALTH PAC

ADDRESS (number and street) ▼ 409 12TH STREET SW

Check if different than previously reported. (ACC)

CITY ▲ WASHINGTON | STATE ▲ DC | ZIPCODE ▲ 20024

2. **FEC IDENTIFICATION NUMBER** ▼ C00364158

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- X October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) | General (12G) | Runoff (12R) | Convention (12C) | Special (12G)

Election on ____ in the State of ____

(d) 30-Day **Post** -Election Report for the: General (30G) | Runoff (30R) | Special (30S)

Election on ____ in the State of ____

5. Covering Period 07 01 2004 through 09 30 2004

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 SARA SLANE

Signature of Treasurer Electronically Filed by SARA SLANE Date 10 06 2004

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)

Write or Type Committee Name
OB-GYNS FOR WOMEN'S HEALTH PAC

Report Covering the Period: From: 07 01 2004 To: 09 30 2004

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2004		46617.73
	(b) Cash on Hand at Begining of Reporting Period	74546.00	
	(c) Total Receipts (from Line 19)	94720.00	217015.00
	(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	169266.00	265632.73
7.	Total Disbursements (from Line 31)	106740.63	203305.36
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62527.37	62527.37
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	

X 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)

Write or Type Committee Name

OB-GYNS FOR WOMEN'S HEALTH PAC

Report Covering the Period: From: 07 01 2004 To: 09 30 2004

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)	86300.00	
(ii) Unitemized	8420.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	94720.00	217015.00
(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) ▶	94720.00	217015.00
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 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))	94720.00	217015.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	94720.00	217015.00

DETAILED SUMMARY PAGE
of Disbursements

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	56490.63	102605.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	56490.63	102605.36
22. Transfers to Affiliated/Other Party Committees	0.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	50250.00	94250.00
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	1450.00
(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	1450.00
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 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))	106740.63	203305.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	106740.63	203305.36

DETAILED SUMMARY PAGE

of Disbursements

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)	94720.00	217015.00
34. Total Contribution Refunds (from Line 28(d))	0.00	1450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	94720.00	215565.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	56490.63	102605.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56490.63	102605.36

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 69
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
SAMIR Z. ABU-GHAZALEH
Mailing Address 1000 EAST 21ST STREET
City: SIOUX FALLS | State: SD | Zip Code: 57105
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7076
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
DEBORAH J. ANDERSON
Mailing Address 1206 NORTH CAPITOL AVENUE
City: SAN JOSE | State: CA | Zip Code: 95132
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 12 2004
Transaction ID: SA11A1.6846
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MARIA C. ASIS
Mailing Address 1435 CHAPEL STREET
City: NEW HAVEN | State: CT | Zip Code: 06525
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6859
Amount of Each Receipt this Period: 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: PAGE 7 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
LAURA A. BAALMANN
Mailing Address 2032 BROOKCREEK
City: KIRKWOOD | State: MO | Zip Code: 63122
FEC ID number of contributing federal political committee: C
Name of Employer: BALANCED CARE FOR WOMEN
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6778
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
EDWIN L. BAKER
Mailing Address 205 LONDONDERRY DRIVE
City: LUMBERTON | State: NC | Zip Code: 28358
FEC ID number of contributing federal political committee: C
Name of Employer: WOMEN'S LIFE CENTER OF LUMBERTON
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6895
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
RICHARD P. BENEDICT
Mailing Address 2051 EAST LOS LAGOS DRIVE
City: FORT MOJAVE | State: AZ | Zip Code: 86426
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6926
Amount of Each Receipt this Period: 300.00

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: PAGE 8 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JIM P. BENGE
Mailing Address 17815 FOREST PARK LANE
City: SPRING | State: TX | Zip Code: 77379
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7078
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JOHN R. BENNETT
Mailing Address 71 MEADOWS ROAD
City: HANNIBAL | State: MO | Zip Code: 63401
FEC ID number of contributing federal political committee: C
Name of Employer: HANNIBAL CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7080
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT E. BLEDSOE, JR.
Mailing Address 2420 CONGRESS PARKWAY SOUTH
City: ATHENS | State: TN | Zip Code: 37303
FEC ID number of contributing federal political committee: C
Name of Employer: ATHENS WOMEN'S CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2200.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6989
Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ▶ **3500.00**

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 9 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
FREDERICK J. BOEHM
Mailing Address 824 ILLINOIS AVENUE
City: STEVENS POINT | State: WI | Zip Code: 54481
FEC ID number of contributing federal political committee: C
Name of Employer: RICE MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6861
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
FLOYD P. BOND
Mailing Address P.O. BOX 3409
City: SHIPROCK | State: NM | Zip Code: 87420
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 12 2004
Transaction ID: SA11A1.7050
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MARIA G. BRIGGS
Mailing Address 3562 OAK STREET
City: JACKSONVILLE | State: FL | Zip Code: 32205
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7082
Amount of Each Receipt this Period: 250.00

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: PAGE 10 / 69
(check only one)

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
MARY C. BURKE
Mailing Address 1949 LAKESHORE DRIVE
City: KLAMATH FALLS | State: OR | Zip Code: 97601
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6898
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
LONNIE S. BURNETT
Mailing Address 78 CONCORD PARK WEST
City: NASHVILLE | State: TN | Zip Code: 37205
FEC ID number of contributing federal political committee: C
Name of Employer: VANDERBILT ONIVERSITY
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1100.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6781
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
M. REBECCA BUTLER
Mailing Address 4809 19TH STREET
City: LUBBOCK | State: TX | Zip Code: 79407
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 13 2004
Transaction ID: SA11A1.7046
Amount of Each Receipt this Period: 500.00

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: PAGE 11 / 69
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
CINDY CANNON
Mailing Address 832 EAST NORTHCLIFFE DRIVE
City: SALT LAKE CITY | State: UT | Zip Code: 84103
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 2500.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6782
Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
FRANCIS J. CARDINALE
Mailing Address 4640 AMBASSADOR CAFFERY
City: LAFAYETTE | State: LA | Zip Code: 70508
FEC ID number of contributing federal political committee: C
Name of Employer: ACADIANA WOMEN'S HEALTH
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6930
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
DONALD C. CHAMBERS
Mailing Address 18 BRICKFORD LANE
City: PIKESVILLE | State: MD | Zip Code: 21208
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 07 07 2004
Transaction ID: SA11A1.6835
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **3250.00**

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 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
RACHEL I. CHUA
Mailing Address 4150 NELSON ROAD
City: LAKE CHARLES | State: LA | Zip Code: 70605
FEC ID number of contributing federal political committee: C
Name of Employer: OB/GYN ASSOCIATES
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6932
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
HARVEY M. COHEN
Mailing Address 5691 SOUTHMOOR LANE
City: ENGLEWOOD | State: CO | Zip Code: 80111
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6972
Amount of Each Receipt this Period: 700.00

C. Full Name (Last, First, Middle Initial)
MICHAEL K. CONLEY
Mailing Address 500 EAST RIDGE STREET
City: MARQUETTE | State: MI | Zip Code: 49855
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6934
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1450.00**

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 13 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
KIMBERLY J. CULL
Mailing Address 4501 LIBERTY ROAD
City: DELAWARE | State: OH | Zip Code: 43015
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6935
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
DIANA CURRAN
Mailing Address 2325 SOUTH 68TH STREET
City: OMAHA | State: NE | Zip Code: 68124
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF NEBRASKA
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1100.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6787
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
ANNA M. D'AMICO
Mailing Address 7 BUCKRIDGE DRIVE
City: WILMINGTON | State: DE | Zip Code: 19807
FEC ID number of contributing federal political committee: C
Name of Employer: CROZER CHESTER HOSPITAL
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 20 2004
Transaction ID: SA11A1.7027
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **2250.00**

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 14 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
LAURA J. DALTON
Mailing Address 329 NEWTON COURT
City: OAKLYN | State: NJ | Zip Code: 08107
FEC ID number of contributing federal political committee: C
Name of Employer: METHODIST HOSPITAL
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 03 2004
Transaction ID: SA11A1.7137
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
KEVIN M. DAUS
Mailing Address 2675 NORTH DECATUR ROAD
City: DECATUR | State: GA | Zip Code: 30033
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7088
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
LEON D. DAVIS
Mailing Address 126 DOCKSIDE DRIVE
City: JACKSONVILLE | State: NC | Zip Code: 28546
FEC ID number of contributing federal political committee: C
Name of Employer: WOMEN'S HEALTHCARE ASSOCIATES
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7058
Amount of Each Receipt this Period: 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: PAGE 15 / 69
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
TIMOTHY J. DEAHL
Mailing Address 260 I-45 SOUTH
City: HUNTSVILLE | State: TX | Zip Code: 77340
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7089
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
ROBERT H. DEBBS
Mailing Address 2 SASSAFRAS COURT
City: VOORHEES | State: NJ | Zip Code: 08043
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF PENNSYLVANIA
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6788
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
CARL R. DELLA BADIA
Mailing Address 30 ASHTON DRIVE
City: VOORHEES | State: NJ | Zip Code: 08043
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.8975
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

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(check only one)
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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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
MONA DEVANESAN
Mailing Address 2151 45TH STREET
City: WEST PALM BEACH | State: FL | Zip Code: 33407
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7090
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
LORAINE V. DIEGO
Mailing Address 206 NORTH LUCERNE BOULEVARD
City: LOS ANGELES | State: CA | Zip Code: 90004
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6789
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
ANDREA L. DOEDEN
Mailing Address 1301 FOX COVE COURT
City: EDMOND | State: OK | Zip Code: 73034
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 06 2004
Transaction ID: SA11A1.6829
Amount of Each Receipt this Period: 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: PAGE 17 / 69
(check only one)

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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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
MARK A. DOWDLE
Mailing Address 1501 HILAND AVENUE
City: BURLEY | State: ID | Zip Code: 83318
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7091
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
TROY D. ECKMAN
Mailing Address 515 EAST GRANT STREET
City: MACOMB | State: IL | Zip Code: 61455
FEC ID number of contributing federal political committee: C
Name of Employer: SEFL-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 12 2004
Transaction ID: SA11A1.6848
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
JAMES B. EDWARDS, III
Mailing Address 1306 NORTH FRASER STREET
City: GEORGETOWN | State: SC | Zip Code: 29440
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6897
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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 18 / 69
(check only one)
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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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
MARYGRACE ELSON
Mailing Address 3661 FOXANA DRIVE
City: IOWA CITY | State: IA | Zip Code: 52246
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF IOWA HEALTH CARE
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 20 2004
Transaction ID: SA11A1.7028
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
STEVEN L. FARBER
Mailing Address 213 MCCLANAHAN STREET
City: ROANOKE | State: VA | Zip Code: 24014
FEC ID number of contributing federal political committee: C
Name of Employer: CARILION HEALTH SYSTEM
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6864
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
BENIGNO D. FEDERICI
Mailing Address 2790 GODWIN BOULEVARD
City: SUFFOLK | State: VA | Zip Code: 23434
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7092
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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 19 / 69
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
ANNA FIELDMAN
Mailing Address 186-03 MIDLAND PARKWAY
City: JAMAICA ESTATES | State: NY | Zip Code: 11432
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1100.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6790
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
STEVEN T. FOGEL
Mailing Address 6099 WEST MEADOW DRIVE, NE
City: ADA | State: MI | Zip Code: 49301
FEC ID number of contributing federal political committee: C
Name of Employer: ANESTHESIA MEDICAL CONSULTANTS
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6981
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
NATHAN G. FUJITA
Mailing Address 1329 LUSITANA STREET
City: HONOLULU | State: HI | Zip Code: 96813
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6982
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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 / 69
(check only one)

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JOHN S. GARRA
Mailing Address 234 JEFFERSON AVENUE
City: HADDONFIELD | State: NJ | Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6793
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JOSEPH GAUTA
Mailing Address 5941 SPANISH OAKS LANE
City: NAPLES | State: FL | Zip Code: 34119
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6794
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
PAUL A. GLUCK
Mailing Address 10165 SOUTHWEST 84TH COURT
City: MIAMI | State: FL | Zip Code: 33156
FEC ID number of contributing federal political committee: C
Name of Employer: VITAL MD, LLC
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6796
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1100.00**

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 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
SONIA M. GOF
Mailing Address 510 HAMBURG TURNPIKE
City: WAYNE | State: NJ | Zip Code: 07470
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 13 2004
Transaction ID: SA11A1.7048
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
A.M. GOHARI
Mailing Address 10411 WILLOWBROOK DRIVE
City: POTOMAC | State: MD | Zip Code: 20854
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 550.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6797
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
LAURIE R. GOLDSTEIN
Mailing Address 134 EAST 93RD STREET
City: NEW YORK | State: NY | Zip Code: 10128
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 15 2004
Transaction ID: SA11A1.6913
Amount of Each Receipt this Period: 1000.00

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: PAGE 22 / 69
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
SANDRA D. GOTTWALD
Mailing Address 380 EAST DAPHNE ROAD
City: MILWAUKEE | State: WI | Zip Code: 53217
FEC ID number of contributing federal political committee: C
Name of Employer: ADVANCED HEALTHCARE
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6983
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
CHARLES R. GULICK
Mailing Address 22 UPPER LADUE ROAD
City: ST. LOUIS | State: MO | Zip Code: 63124
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 14 2004
Transaction ID: SA11A1.7183
Amount of Each Receipt this Period: 400.00

C. Full Name (Last, First, Middle Initial)
ELLEN M. GUTHRIE
Mailing Address 13 BRADLEE ROAD
City: MEDFORD | State: MA | Zip Code: 02155
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 13 2004
Transaction ID: SA11A1.7174
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
RALPH W. HALE
Mailing Address 2808 WHIRLAWAY CIRCLE
City: OAK HILL | State: VA | Zip Code: 20171
FEC ID number of contributing federal political committee: C
Name of Employer: ACOG
Occupation: EXECUTIVE VICE PRESIDENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6799
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
KELLEY A. HANRAHAN
Mailing Address 4123 WOODLAWN AVENUE NORTH
City: SEATTLE | State: WA | Zip Code: 98103
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 06 2004
Transaction ID: SA11A1.6831
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
BEVERLY M. HARRIS
Mailing Address 2251 STANTONSBURG ROAD
City: GREENVILLE | State: NC | Zip Code: 27834
FEC ID number of contributing federal political committee: C
Name of Employer: GREENVILLE WOMEN'S CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6898
Amount of Each Receipt this Period: 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 24 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
KENNETH D. HATCH
Mailing Address 2800 EAST CAMINO LA BRINCA
City: TUCSON | State: AZ | Zip Code: 85718
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF ARIZONA
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6868
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
SCOTT D. HAYWORTH
Mailing Address 90 SOUTH BEDFORD ROAD
City: MOUNT KISCO | State: NY | Zip Code: 10549
FEC ID number of contributing federal political committee: C
Name of Employer: MOUNT KISCO MEDICAL GROUP
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 24 2004
Transaction ID: SA11A1.7154
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
BRYAN R. HECHT
Mailing Address 7839 HEARTHSTONE
City: NORTH CANTON | State: OH | Zip Code: 44720
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6800
Amount of Each Receipt this Period: 250.00

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

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
J. PATRICK HEFFRON
Mailing Address 8185 NORTHEAST JUANITA DRIVE
City: KIRKLAND | State: WA | Zip Code: 98034
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6984
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
PAUL B. HELLER
Mailing Address 100 MADISON AVENUE
City: MORRISTOWN | State: NJ | Zip Code: 07960
FEC ID number of contributing federal political committee: C
Name of Employer: MEMORIAL HOSPITAL
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7096
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
ALLAN W. HO
Mailing Address 483 MIDDLE ROAD
City: STROUDSBURG | State: PA | Zip Code: 18360
FEC ID number of contributing federal political committee: C
Name of Employer: FAMILY CARE CENTER
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6899
Amount of Each Receipt this Period: 300.00

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 26 / 69
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X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JOSHUA B. HOLDEN
Mailing Address 275 WEST 96TH STREET
City: NEW YORK | State: NY | Zip Code: 10025
FEC ID number of contributing federal political committee: C
Name of Employer: COLUMBIA PRESBYTERIAN HOSPITAL
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6936
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
LISA M. HOLLIER
Mailing Address 6812 MERCER STREET
City: HOUSTON | State: TX | Zip Code: 77005
FEC ID number of contributing federal political committee: C
Name of Employer: UT HOUSTON MEDICAL SCHOOL
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6801
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
BENSON J. HOROWITZ
Mailing Address 449 FARMINGTON AVENUE
City: HARTFORD | State: CT | Zip Code: 06105
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6945
Amount of Each Receipt this Period: 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

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(check only one)

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
LAURA R. HULBERT
Mailing Address 2900 LEMAY FERRY ROAD
City: ST. LOUIS | State: MO | Zip Code: 63125
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 26 2004
Transaction ID: SA11A1.7167
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
PHILIP B. IVEY
Mailing Address 1094 NORTH DESERT WILLOW STREET
City: CASA GRANDE | State: AZ | Zip Code: 85222
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 2500.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6838
Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
JOHN C. JENNINGS
Mailing Address 301 UNIVERSITY BOULEVARD
City: GALVESTON | State: TX | Zip Code: 77555
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7098
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
DAPHNE L. JONES
Mailing Address 102 HUNDLEY PARK COURT
City: GOLDSBORO | State: NC | Zip Code: 27534
FEC ID number of contributing federal political committee: C
Name of Employer: WAYNE WOMEN'S CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 03 2004
Transaction ID: SA11A1.7139
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
GERALD F. JOSEPH, JR.
Mailing Address 3430 EAST HUNTER LANE
City: OZARK | State: MO | Zip Code: 65721
FEC ID number of contributing federal political committee: C
Name of Employer: ST. JOHN'S CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6809
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
MARK KALCHBRENNER
Mailing Address 3702 FAIRWAY PLACE
City: ROCKFORD | State: IL | Zip Code: 61107
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 03 2004
Transaction ID: SA11A1.7141
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
REGINA M. KAPLAN
Mailing Address 5 KATHLEEN PLACE
City: MORRIS PLAINS | State: NJ | Zip Code: 07950
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6804
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
HOWARD K. KAUFMAN
Mailing Address 3428 BURLWOOD DRIVE
City: ROCKFORD | State: IL | Zip Code: 61114
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 03 2004
Transaction ID: SA11A1.7143
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
GARY L. KAYE
Mailing Address 31 SOUTH UNION STREET
City: CRANFORD | State: NJ | Zip Code: 07016
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7099
Amount of Each Receipt this Period: 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 30 / 69
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
JEFFREY KOROTKIN
Mailing Address 5016 GREEN PINE DRIVE
City: ATLANTA | State: GA | Zip Code: 30342
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7100
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
ROBERT G. KOSS
Mailing Address 1875 DEMPSTER STREET
City: PARK RIDGE | State: IL | Zip Code: 60068
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6872
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
ZBIGNIEW J. KULA
Mailing Address 115 WOODSHIRE DRIVE
City: CROSSETT | State: AR | Zip Code: 71635
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6951
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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 / 69
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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)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
KOTESWARA R. KUNDA
Mailing Address 100 RIVERSIDE DRIVE
City: SAN MARCOS | State: TX | Zip Code: 78666
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6953
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
AMELIA E. LAING
Mailing Address 424 MEADOW LANE
City: WOOSTER | State: OH | Zip Code: 44691
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6805
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
MARILYN K. LAUGHEAD
Mailing Address 9046 EAST HAVASUPAI DRIVE
City: SCOTTSDALE | State: AZ | Zip Code: 85255
FEC ID number of contributing federal political committee: C
Name of Employer: IRONWOOD WOMEN'S HEALTH
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6806
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
RONALD LIBRIZZI
Mailing Address 956 KRESSON ROAD
City: CHERRY HILL | State: NJ | Zip Code: 08003
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6990
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
LINDA J. LITZINGER
Mailing Address 3429 MONTE VISTA DRIVE
City: AUSTIN | State: TX | Zip Code: 78731
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 20 2004
Transaction ID: SA11A1.7033
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
CHARLES J. LOCKWOOD
Mailing Address 33 LIBERTY STREET
City: MADISON | State: CT | Zip Code: 06443
FEC ID number of contributing federal political committee: C
Name of Employer: YALE UNIVESITY
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6807
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
SCOTT N. MACGREGOR
Mailing Address 2650 RIDGE AVENUE
City: EVANSTON | State: IL | Zip Code: 60201
FEC ID number of contributing federal political committee: C
Name of Employer: EVANSTON HEALTHCARE
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7104
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
KAILASH R. MAKHIJA
Mailing Address 281 NORTH 12TH STREET
City: LEHIGHTON | State: PA | Zip Code: 18235
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6874
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
ROBERT J. MAROTZ
Mailing Address 12640 SOUTH 34TH PLACE
City: PHOENIX | State: AZ | Zip Code: 85044
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6808
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **1750.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JAMES N. MARTIN, JR.
Mailing Address 2101 EASTOVER DRIVE
City: JACKSON | State: MS | Zip Code: 39211
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF MISSISSIPPI
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6839
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MICHELLE MARTIN
Mailing Address 5109 MASOTA ROAD
City: RALEIGH | State: NC | Zip Code: 27612
FEC ID number of contributing federal political committee: C
Name of Employer: WILKERSON OB-GYN
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7061
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
JOHN H. MATTOX
Mailing Address 30737 NORTH 77TH WAY
City: SCOTTSDALE | State: AZ | Zip Code: 85262
FEC ID number of contributing federal political committee: C
Name of Employer: BANNER HEALTH
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6840
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ▶ **1650.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JOHN C. MCAMIS
Mailing Address 2106 SOUTHWOOD DRIVE
City: MARYVILLE | State: TN | Zip Code: 37803
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7108
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
WILLIAM M. MCCULLOUGH, JR.
Mailing Address 139 SIGNATURE DRIVE SOUTH
City: BEAVERCREEK | State: OH | Zip Code: 45385
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6809
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
TERRENCE G. MCGAW
Mailing Address 75 PRINGLE WAY
City: RENO | State: NV | Zip Code: 89502
FEC ID number of contributing federal political committee: C
Name of Employer: MEDICAL GROUP OF NORTH NEVADA
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 19 2004
Transaction ID: SA11A1.6922
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1300.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JOHN J. MCHUGH
Mailing Address 5187 PALE MOON DRIVE
City: PENSACOLA | State: FL | Zip Code: 32507
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7063
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JOYCE M. MCKENNEY
Mailing Address P.O. BOX 929
City: DELTA | State: CO | Zip Code: 81416
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7108
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
TERRY Y. MCMILLIN
Mailing Address 507 EAST BARTON AVENUE
City: GREENWOOD | State: MS | Zip Code: 38930
FEC ID number of contributing federal political committee: C
Name of Employer: GREENWOOD/LEFLORE HOSPITAL
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7110
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
LUIS R. MERTINS
Mailing Address 1400 HIGHWAY 61
City: FESTUS | State: MO | Zip Code: 63028
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6878
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MARYANN E. MILLAR-KAVEY
Mailing Address 19B CARRIAGE HOUSE CIRCLE
City: CAZENOVIA | State: NY | Zip Code: 13035
FEC ID number of contributing federal political committee: C
Name of Employer: WOMEN'S VIEW GYNECOLOGY
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6991
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
JIM L. MINDER
Mailing Address 772 EAST KAKOTA AVENUE
City: PIERRE | State: SD | Zip Code: 57501
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7111
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM T. MIXSON
Mailing Address 124 FAIRWAY COTTAGE LANE
City: HIGHLANDS | State: NC | Zip Code: 28741
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6841
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
ALETHIA E. MORGAN
Mailing Address 1120 MINNEQUA AVENUE
City: PUEBLO | State: CO | Zip Code: 81004
FEC ID number of contributing federal political committee: C
Name of Employer: ASSOCIATES FOR WOMEN'S HEALTH
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7065
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
V.S. MORISETTY
Mailing Address 779 SCHROLL COURT
City: FORSYTH | State: IL | Zip Code: 62535
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6811
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
DONNA L. MUSGRAVE
Mailing Address 21 HIGHLAND AVENUE
City: ROANOKE | State: VA | Zip Code: 24013
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7113
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
FRANK F. MUSSEMANN
Mailing Address 1908 CEDARWOOD TRAIL
City: BELLEVILLE | State: IL | Zip Code: 62226
FEC ID number of contributing federal political committee: C
Name of Employer: F.J. MILLER LTD.
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6880
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
KARA M. NAKISBENDI
Mailing Address 233 EAST LANCASTER AVENUE
City: ARDMORE | State: PA | Zip Code: 19003
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 12 2004
Transaction ID: SA11A1.6852
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JOHNNY L. NEIGHBORS
Mailing Address 1506 NORTH LIMESTONE STREET
City: GAFFNEY | State: SC | Zip Code: 29340
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6812
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
J. DOUGLAS NISBET
Mailing Address 390 TOLL GATE ROAD
City: WARWICK | State: RI | Zip Code: 02886
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6881
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
PAUL L. OGBURN, JR.
Mailing Address 175 OLD FIELD ROAD
City: OLD FIELD | State: NY | Zip Code: 11733
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6959
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1750.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
MUKESH T. PAREKH
Mailing Address 5622 NORTH PORTLAND
City: OKLAHOMA CITY | State: KS | Zip Code: 73112
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 06 2004
Transaction ID: SA11A1.6833
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
GORDON S. PARK
Mailing Address 7940 SIESTA DRIVE
City: SALT LAKE CITY | State: UT | Zip Code: 84093
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7067
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MAXWELL V. PARKER
Mailing Address 1501 SOUTH AIRPORT DRIVE
City: WESLACO | State: TX | Zip Code: 78596
FEC ID number of contributing federal political committee: C
Name of Employer: KNAPP MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 07 20 2004
Transaction ID: SA11A1.6923
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
R. BRUCE PARKER
Mailing Address 1407 NORTH PORTER AVENUE
City: NORMAN | State: OK | Zip Code: 73071
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 14 2004
Transaction ID: SA11A1.7187
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
SRISAWAI PATTAMAKOM
Mailing Address 8066 DENVER STREET
City: VENTURA | State: CA | Zip Code: 93004
FEC ID number of contributing federal political committee: C
Name of Employer: PATTAMAKOM OB/GYN GROUP
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6882
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
WARREN H. PEARSE
Mailing Address 10450 LOTTSFORD ROAD
City: MITCHELLVILLE | State: MD | Zip Code: 20721
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6813
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ **1100.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JAMES L. PINTO
Mailing Address 821 BROOK STREET
City: ELGIN | State: LA | Zip Code: 60120
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 03 2004
Transaction ID: SA11A1.7147
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
TULASI P. POLAVARAPU
Mailing Address 1 HANSON PLACE
City: BROOKLYN | State: NY | Zip Code: 11243
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6961
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
JOSE R. QUINONES, JR.
Mailing Address 6410 VETERANS AVENUE
City: BROOKLYN | State: NY | Zip Code: 11234
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7119
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JEFFREY R. RICHARDSON, JR.
Mailing Address 3555 LOMA VISTA ROAD
City: VENTURA | State: CA | Zip Code: 93003
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6842
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
CHARLAH A. ROBINSON
Mailing Address 8200 NORTH PELICAN LANE
City: RIVER HILLS | State: WI | Zip Code: 53217
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7069
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
ANNE MARIE A. ROE
Mailing Address 90 TROUDER TRAIL
City: BRONXVILLE | State: NY | Zip Code: 10708
FEC ID number of contributing federal political committee: C
Name of Employer: EINSTEIN COLLEGE OF MEDICINE
Occupation: STUDENT
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 25 2004
Transaction ID: SA11A1.7185
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1250.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
GERARD M. ROY
Mailing Address 40 HART STREET
City: NEW BRITAIN | State: CT | Zip Code: 06052
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6886
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MARK H. SALLEY
Mailing Address 1666 TANGLEWOOD ROAD
City: COLUMBIA | State: SC | Zip Code: 29204
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 21 2004
Transaction ID: SA11A1.7169
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
NANETTE F. SANTORO
Mailing Address 214 BENNINGTON TERRACE
City: PARAMUS | State: NJ | Zip Code: 07652
FEC ID number of contributing federal political committee: C
Name of Employer: ALBERT EINSTEIN COLLEGE
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 12 2004
Transaction ID: SA11A1.6853
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
JEFFREY L. SCHAFFER
Mailing Address 1 CAYLOR NICKEL SQUARE
City: BLUFFTON | State: IN | Zip Code: 46714
FEC ID number of contributing federal political committee: C
Name of Employer: CAYLOR NICKEL CLINIC
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 550.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6843
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JONATHAN A. SCHAFFIR
Mailing Address 456 WEST 10TH AVENUE
City: COLUMBUS | State: OH | Zip Code: 43210
FEC ID number of contributing federal political committee: C
Name of Employer: OHIO STATE UNIVERSITY
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7120
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
DAPHNE B. SCHALAU
Mailing Address 1813 WEST HARVARD AVENUE
City: ROSEBURG | State: OR | Zip Code: 97470
FEC ID number of contributing federal political committee: C
Name of Employer: HEALTHCARE FOR WOMEN
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6817
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **1700.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
DEBRA L. SCHLOSSBERG
Mailing Address 9977 WOODS
City: SKOKIE | State: IL | Zip Code: 60077
FEC ID number of contributing federal political committee: C
Name of Employer: ENH MEDICAL
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 07 12 2004
Transaction ID: SA11A1.6855
Amount of Each Receipt this Period: 750.00

B. Full Name (Last, First, Middle Initial)
RICHARD H. SCHWARZ
Mailing Address 57 GREEN MEADOW LANE
City: HUNTINGTON | State: NY | Zip Code: 11743
FEC ID number of contributing federal political committee: C
Name of Employer: MAIMONIDES MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6887
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
DENIS T. SCONZO
Mailing Address 10 PEBBLE BEACH LANE
City: WHITE PLAINS | State: NY | Zip Code: 10605
FEC ID number of contributing federal political committee: C
Name of Employer: WESTCHESTER OB/GYN
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6905
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
TODD A. SHAPIRO
Mailing Address 46 ELIOT
City: JAMAICA PLAIN | State: MA | Zip Code: 02130
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 08 2004
Transaction ID: SA11A1.6844
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
ELIZABETH A. SIMONEAU
Mailing Address 5289 NORTH SUNSET SHADOWS
City: TUCSON | State: AZ | Zip Code: 85750
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6963
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
ELIZABETH A. SIMONEAU
Mailing Address 5289 NORTH SUNSET SHADOWS
City: TUCSON | State: AZ | Zip Code: 85750
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7121
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **1750.00**

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

SCHEDULE A (FEC Form 3X)
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Use separate schedule(s) or each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
S. TERRELL SMITH
Mailing Address 168 STONE RIDGE DRIVE
City: COLUMBIA | State: SC | Zip Code: 29209
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 14 2004
Transaction ID: SA11A1.6907
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
DOUGLAS M. SODERBERG
Mailing Address 6424 TIMBER RIDGE
City: EDINA | State: MN | Zip Code: 55439
FEC ID number of contributing federal political committee: C
Name of Employer: MINNESOTA GYNECOLOGY & SURGERY
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 12 2004
Transaction ID: SA11A1.6857
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
RICK D. ST. ONGE
Mailing Address 554 JUNIPER LANE
City: GALLIPOLIS | State: OH | Zip Code: 45631
FEC ID number of contributing federal political committee: C
Name of Employer: HOLZER CLINIC
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6821
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **2000.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
ROBERT T. STARK
Mailing Address 111 JAMES STREET
City: EDISON | State: NJ | Zip Code: 08820
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 24 2004
Transaction ID: SA11A1.7159
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
JOHN P. STEWART
Mailing Address 41 OAKLAND ROAD
City: ASHEVILLE | State: NC | Zip Code: 28801
FEC ID number of contributing federal political committee: C
Name of Employer: LAUREL OB/GYN
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6888
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
LAURA R. STONE
Mailing Address 2327 SOUTH INGE STREET
City: ARLINGTON | State: VA | Zip Code: 22202
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6822
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1000.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
RAMON SUAREZ
Mailing Address 725 NORTH ISLAND DRIVE
City: ATLANTA | State: GA | Zip Code: 30327
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6823
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
JUDITH A. SWAUGER
Mailing Address 5216 UPTON AVENUE SOUTH
City: MINNEAPOLIS | State: MN | Zip Code: 55410
FEC ID number of contributing federal political committee: C
Name of Employer: PARK NICOLLET CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6996
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
PAUL D. URNES
Mailing Address 880 NORTH LAKE SHORE DRIVE
City: CHICAGO | State: IL | Zip Code: 60611
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 350.00

Date of Receipt: 08 10 2004
Transaction ID: SA11A1.7126
Amount of Each Receipt this Period: 350.00

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 52 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
KEDRIN E. VAN STEENWYK
Mailing Address 2115 LEITER ROAD
City: MIAMISBERG | State: OH | Zip Code: 45342
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 09 2004
Transaction ID: SA11A1.6998
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
JOSE J. VILLARREAL-GARCIA
Mailing Address 3100 NORTH STANTON AVENUE
City: EL PASO | State: TX | Zip Code: 79902
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 24 2004
Transaction ID: SA11A1.7161
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial)
WILLIAM C. VOGELPOHL
Mailing Address 337 EL DORADO STREET
City: MONTEREY | State: CA | Zip Code: 93940
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6892
Amount of Each Receipt this Period: 1000.00

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: PAGE 53 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
K. WARREN VOLKER
Mailing Address 853 NORTH TOWN CENTER
City: LAS VEGAS | State: NV | Zip Code: 89144
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 13 2004
Transaction ID: SA11A1.6893
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
ERNA A. WAXMAN
Mailing Address 3747 SAPPHIRE DRIVE
City: MARTINEZ | State: GA | Zip Code: 30907
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 12 2004
Transaction ID: SA11A1.7055
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
DONALD F. WEBER
Mailing Address 3508 SHARON DRIVE
City: EAU CLAIRE | State: WI | Zip Code: 54701
FEC ID number of contributing federal political committee: C
Name of Employer: MIDDLEFORT CLINIC
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 28 2004
Transaction ID: SA11A1.7201
Amount of Each Receipt this Period: 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: PAGE 54 / 69
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
SELMAN I. WELT
Mailing Address COUNTRY PLACE
City: LUBBOCK | State: TX | Zip Code: 79407
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6968
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
DAVID J. WILLIAMS
Mailing Address 460 WEST BANKHEAD
City: NEW ALBANY | State: MS | Zip Code: 38652
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 11 2004
Transaction ID: SA11A1.7073
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
ELLEN E. WILSON
Mailing Address 4209 AMHERST AVENUE
City: DALLAS | State: TX | Zip Code: 75225
FEC ID number of contributing federal political committee: C
Name of Employer: UT SOUTHWESTERN MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 5000.00

Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6824
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6500.00

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 55 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
KEVIN W. WINDOM
Mailing Address 485 HILLSIDE DRIVE
City: ATLANTA | State: GA | Zip Code: 30342
FEC ID number of contributing federal political committee: C
Name of Employer: RICE MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 16 2004
Transaction ID: SA11A1.6825
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
KRISTINE M. ZELENKOV
Mailing Address 3355 TWIN PEAKS CIRCLE
City: LAYTON | State: UT | Zip Code: 84040
FEC ID number of contributing federal political committee: C
Name of Employer: ROCKY MOUNTAIN OB/GYN
Occupation: PHYSICIAN
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 08 05 2004
Transaction ID: SA11A1.6968
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶ **86300.00**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
COATES & HUTCHINSON, PC

Mailing Address P.O. BOX 561

City: ODENTON | State: MD | Zip Code: 21113

Purpose of Disbursement: ACCOUNTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7039
Date of Disbursement: 08 / 20 / 2004

Amount of Each Disbursement this Period: 900.00

B.
Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address P.O. BOX 371461

City: PITTSBURGH | State: PA | Zip Code: 15250

Purpose of Disbursement: DELIVERY

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.6777
Date of Disbursement: 07 / 13 / 2004

Amount of Each Disbursement this Period: 427.95

C.
Full Name (Last, First, Middle Initial)
SUSANNE HAESSLER

Mailing Address 3401 38TH STREET, NW

City: WASHINGTON | State: DC | Zip Code: 20016

Purpose of Disbursement: ACCOUNTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.6776
Date of Disbursement: 07 / 05 / 2004

Amount of Each Disbursement this Period: 1687.50

SUBTOTAL of Disbursements This Page (optional) ▶ **3015.45**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
SUSANNE HAESSLER

Mailing Address 3401 38TH STREET, NW

City: WASHINGTON | State: DC | Zip Code: 20016

Purpose of Disbursement: ACCOUNTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7001
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 1653.75

B.
Full Name (Last, First, Middle Initial)
SUSANNE HAESSLER

Mailing Address 3401 38TH STREET, NW

City: WASHINGTON | State: DC | Zip Code: 20016

Purpose of Disbursement: POSTAGE & DELIVERY

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7041
Date of Disbursement: 08 / 20 / 2004

Amount of Each Disbursement this Period: 195.67

C.
Full Name (Last, First, Middle Initial)
SUSANNE HAESSLER

Mailing Address 3401 38TH STREET, NW

City: WASHINGTON | State: DC | Zip Code: 20016

Purpose of Disbursement: ACCOUNTING

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7134
Date of Disbursement: 09 / 03 / 2004

Amount of Each Disbursement this Period: 2396.25

SUBTOTAL of Disbursements This Page (optional) ▶ **4245.67**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27
[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b		

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
SUSANNE HAESSLER

Mailing Address 3401 38TH STREET, NW

City: WASHINGTON | State: DC | Zip Code: 20016

Purpose of Disbursement: SUPPLIES

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7197
Date of Disbursement: 09 / 21 / 2004

Amount of Each Disbursement this Period: 76.93

B. Full Name (Last, First, Middle Initial)
MERCURY GROUP

Mailing Address 1601 NORTHWEST EXPRESSWAY

City: OKLAHOMA CITY | State: OK | Zip Code: 73118

Purpose of Disbursement: GENERIC DIRECT MAIL SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7004
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 8894.34

C. Full Name (Last, First, Middle Initial)
MERCURY GROUP

Mailing Address 1601 NORTHWEST EXPRESSWAY

City: OKLAHOMA CITY | State: OK | Zip Code: 73118

Purpose of Disbursement: GENERIC DIRECT MAIL SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7042
Date of Disbursement: 08 / 20 / 2004

Amount of Each Disbursement this Period: 9000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **17971.27**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27
[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b		

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 300 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.6775
Date of Disbursement: 07 / 05 / 2004

Amount of Each Disbursement this Period: 520.63

B. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 300 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.6916
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 2720.00

C. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 300 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7002
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 7076.27

SUBTOTAL of Disbursements This Page (optional) ▶ **10316.90**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 300 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7040
Date of Disbursement: 08 / 20 / 2004

Amount of Each Disbursement this Period: 9663.15

B. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 300 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7136
Date of Disbursement: 09 / 03 / 2004

Amount of Each Disbursement this Period: 7320.66

C. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 300 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President — State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7198
Date of Disbursement: 09 / 21 / 2004

Amount of Each Disbursement this Period: 2964.39

SUBTOTAL of Disbursements This Page (optional) ▶ **18968.20**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
NATIONAL CAPITAL TELESERVICES

Mailing Address 900 FIFTH STREET, NE

City: WASHINGTON | State: DC | Zip Code: 20002

Purpose of Disbursement: GENERIC TELEPHONE SOLICITATIONS

Candidate Name

Category/ Type

Office Sought: House / Senate / President | State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7212
Date of Disbursement: 09 / 28 / 2004

Amount of Each Disbursement this Period: 1583.14

B. Full Name (Last, First, Middle Initial)
SUNTRUST BANK

Mailing Address 1445 NEW YORK AVENUE, NW

City: WASHINGTON | State: DC | Zip Code: 20005

Purpose of Disbursement: BANK CHARGE

Candidate Name

Category/ Type

Office Sought: House / Senate / President | State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7006
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 60.00

C. Full Name (Last, First, Middle Initial)
SUNTRUST BANK

Mailing Address 1445 NEW YORK AVENUE, NW

City: WASHINGTON | State: DC | Zip Code: 20005

Purpose of Disbursement: BANK CHARGE

Candidate Name

Category/ Type

Office Sought: House / Senate / President | State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7135
Date of Disbursement: 08 / 20 / 2004

Amount of Each Disbursement this Period: 60.00

SUBTOTAL of Disbursements This Page (optional) ▶ **1703.14**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b	

NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

Full Name (Last, First, Middle Initial)
A. SUNTRUST BANK

Mailing Address 1445 NEW YORK AVENUE, NW

City: WASHINGTON
State: DC
Zip Code: 20005

Purpose of Disbursement: BANK CHARGE

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: SB21B.7204
Date of Disbursement: 09 / 21 / 2004

Amount of Each Disbursement this Period: 75.00

SUBTOTAL of Disbursements This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	56295.63

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
BILL MCCOLLUM FOR U.S. SENATE

Mailing Address P.O. BOX 532015

City ORLANDO | State FL | Zip Code 32853

Purpose of Disbursement
CONTRIBUTION

Candidate Name
BILL MCCOLLUM

Category/ Type

Office Sought: House / X Senate / President
State: FL District: 00

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: SB23.7019
Date of Disbursement 08 / 12 / 2004

Amount of Each Disbursement this Period
4000.00

B.
Full Name (Last, First, Middle Initial)
BILL MCCOLLUM FOR U.S. SENATE

Mailing Address P.O. BOX 532015

City ORLANDO | State FL | Zip Code 32853

Purpose of Disbursement
CONTRIBUTION

Candidate Name
BILL MCCOLLUM

Category/ Type

Office Sought: House / X Senate / President
State: FL District: 00

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: SB23.7022
Date of Disbursement 08 / 12 / 2004

Amount of Each Disbursement this Period
1000.00

C.
Full Name (Last, First, Middle Initial)
CITIZENS FOR ARLEN SPECTER

Mailing Address 428 C STREET, NE

City WASHINGTON | State DC | Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

Candidate Name
ARLEN SPECTER

Category/ Type

Office Sought: House / X Senate / President
State: PA District: 00

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB23.7017
Date of Disbursement 08 / 09 / 2004

Amount of Each Disbursement this Period
4500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9500.00**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
DAVID VITTER FOR U.S. SENATE

Mailing Address P.O. BOX 8175

City: METAIRIE | State: LA | Zip Code: 70011

Purpose of Disbursement: CONTRIBUTION

Candidate Name: DAVID VITTER

Category/ Type:

Office Sought: House / X Senate / President — State: LA District: 00

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: SB23.7043
Date of Disbursement: 08 / 20 / 2004

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
DEMINT FOR SENATE COMMITTEE, INC.

Mailing Address P.O. BOX 10407

City: GREENVILLE | State: SC | Zip Code: 29603

Purpose of Disbursement: CONTRIBUTION

Candidate Name: JAMES W. DEMINT

Category/ Type:

Office Sought: House / X Senate / President — State: SC District: 00

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: SB23.7023
Date of Disbursement: 08 / 11 / 2004

Amount of Each Disbursement this Period: 4000.00

C. Full Name (Last, First, Middle Initial)
ESSER FOR CONGRESS

Mailing Address P.O. BOX 6401

City: BELLEVUE | State: WA | Zip Code: 98008

Purpose of Disbursement: PRIMARY ELECTION DEBT RETIREMENT

Candidate Name: LUKE ESSER

Category/ Type:

Office Sought: X House / Senate / President — State: WA District: 08

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: SB23.7190
Date of Disbursement: 09 / 21 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **10000.00**

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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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
FEINSTEIN FOR SENATE

Mailing Address 601 SOUTH GLEN OAKS BOULEVARD

City: BURBANK | State: CA | Zip Code: 91502

Purpose of Disbursement: VOID 08/19/03 CONTRIBUTION

Candidate Name: DIANNE FEINSTEIN

Category/ Type

Office Sought: House / X Senate / President — State: CA District: 00

Disbursement For: 2006 — X Primary / General / Other (specify)

Transaction ID: SB23.6921
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: -1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF MELISSA BROWN

Mailing Address P.O. BOX 498

City: FLOURTOWN | State: PA | Zip Code: 19031

Purpose of Disbursement: CONTRIBUTION

Candidate Name: MELISSA M. BROWN

Category/ Type

Office Sought: X House / Senate / President — State: PA District: 13

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: SB23.7007
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF ROY BLUNT

Mailing Address P.O. BOX 50100

City: SPRINGFIELD | State: MO | Zip Code: 65805

Purpose of Disbursement: CONTRIBUTION

Candidate Name: ROY BLUNT

Category/ Type

Office Sought: X House / Senate / President — State: MO District: 07

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: SB23.6919
Date of Disbursement: 07 / 21 / 2004

Amount of Each Disbursement this Period: 3500.00

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
GEORGIANS FOR ISAKSON

Mailing Address 6000 LAKE FOREST DRIVE

City: ATLANTA | State: GA | Zip Code: 30328

Purpose of Disbursement: CONTRIBUTION

Candidate Name: JOHN HARDY ISAKSON

Category/ Type

Office Sought: X House / Senate / President
State: GA District: 06

Disbursement For: 2004
X Primary / General / Other (specify)

Transaction ID: SB23.6770
Date of Disbursement: 07 / 05 / 2004

Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
JOHNSON FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 1986

City: NEW BRITAIN | State: CT | Zip Code: 06050

Purpose of Disbursement: CONTRIBUTION

Candidate Name: NANCY L. JOHNSON

Category/ Type

Office Sought: X House / Senate / President
State: CT District: 05

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB23.7133
Date of Disbursement: 08 / 31 / 2004

Amount of Each Disbursement this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
LISA MURKOWSKI - U.S. SENATE

Mailing Address P.O. BOX 100847

City: ANCHORAGE | State: AK | Zip Code: 99510

Purpose of Disbursement: CONTRIBUTION

Candidate Name: LISA MURKOWSKI

Category/ Type

Office Sought: House / X Senate / President
State: AK District: 00

Disbursement For: 2004
Primary / X General / Other (specify)

Transaction ID: SB23.7205
Date of Disbursement: 09 / 28 / 2004

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7750.00**

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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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
NETHERCUTT FOR SENATE

Mailing Address 330 112TH AVENUE NE

City: BELLEVUE | State: WA | Zip Code: 98004

Purpose of Disbursement: CONTRIBUTION

Candidate Name: GEORGE R. NETHERCUTT

Category/ Type

Office Sought: House / X Senate / President — State: WA District: 00

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: SB23.7208
Date of Disbursement: 09 / 28 / 2004

Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
PICKERING FOR CONGRESS

Mailing Address P.O. BOX 4297

City: BRANDON | State: MS | Zip Code: 39047

Purpose of Disbursement: CONTRIBUTION

Candidate Name: CHARLES W. PICKERING

Category/ Type

Office Sought: X House / Senate / President — State: MS District: 03

Disbursement For: 2004 — Primary / X General / Other (specify)

Transaction ID: SB23.7209
Date of Disbursement: 09 / 28 / 2004

Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City: ROSWELL | State: GA | Zip Code: 30077

Purpose of Disbursement: CONTRIBUTION

Candidate Name: THOMAS E. PRICE

Category/ Type

Office Sought: X House / Senate / President — State: GA District: 06

Disbursement For: 2004 — X Primary / General / Other (specify)

Transaction ID: SB23.6773
Date of Disbursement: 07 / 05 / 2004

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7000.00**

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

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NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A. Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City ROSWELL | State GA | Zip Code 30077

Purpose of Disbursement
CONTRIBUTION

Candidate Name
THOMAS E. PRICE

Category/ Type

Office Sought: X House / Senate / President
State: GA District: 06

Disbursement For: 2004
Primary / General / X Other (specify) ▼
Runoff

Transaction ID: SB23.6920
Date of Disbursement
08 02 2004

Amount of Each Disbursement this Period
9000.00

B. Full Name (Last, First, Middle Initial)
PRYCE FOR CONGRESS

Mailing Address 145 EAST RICH STREET

City COLUMBUS | State OH | Zip Code 43215

Purpose of Disbursement
CONTRIBUTION

Candidate Name
DEBORAH D. PRYCE

Category/ Type

Office Sought: X House / Senate / President
State: OH District: 15

Disbursement For: 2004
Primary / X General / Other (specify) ▼

Transaction ID: SB23.7130
Date of Disbursement
08 27 2004

Amount of Each Disbursement this Period
2000.00

C. Full Name (Last, First, Middle Initial)
RICHARD BURR COMMITTEE

Mailing Address P.O. BOX 5928

City WINSTON-SALEM | State NC | Zip Code 27113

Purpose of Disbursement
CONTRIBUTION

Candidate Name
RICHARD BURR

Category/ Type

Office Sought: House / X Senate / President
State: NC District: 00

Disbursement For: 2004
Primary / X General / Other (specify) ▼

Transaction ID: SB23.7010
Date of Disbursement
08 09 2004

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7000.00**

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

NAME OF COMMITTEE (In Full)
OB-GYNS FOR WOMEN'S HEALTH PAC

A.
Full Name (Last, First, Middle Initial)
UPTON FOR ALL OF US

Mailing Address P.O. BOX 490

City: ST. JOSEPH | State: MI | Zip Code: 49085

Purpose of Disbursement: CONTRIBUTION

Candidate Name: FREDERICK S. UPTON

Category/ Type

Office Sought: X House / Senate / President
State: MI District: 08

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: SB23.7193
Date of Disbursement: 09 / 21 / 2004

Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
VOINOVICH FOR SENATE COMMITTEE

Mailing Address 865 MACON ALLEY

City: COLUMBUS | State: OH | Zip Code: 43206

Purpose of Disbursement: CONTRIBUTION

Candidate Name: GEORGE VOINOVICH

Category/ Type

Office Sought: House / X Senate / President
State: OH District: 00

Disbursement For: 2004 / Primary / X General / Other (specify)

Transaction ID: SB23.7018
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	50250.00