

**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

American Academy of Dermatology Association Political Action Committee

ADDRESS (number and street)

1350 I Street NW

Suite 880

Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00359539

3. IS THIS REPORT

x

NEW (N) OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X 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 (12S)

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

11

29

2004

through

12

31

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

Mr. David Anderson

Signature of Treasurer

Electronically Filed by Mr. David Anderson

Date

01

12

2005

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

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee

Report Covering the Period: From: ^M 1 ^D 23 ^Y 2004 To: ^M 12 ^D 31 ^Y 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		49849.09
(b) Cash on Hand at Beginning of Reporting Period	3386.42	
(c) Total Receipts (from Line 19)	20398.55	80538.52
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	23784.97	130387.61
<hr/>		
7. Total Disbursements (from Line 31)	-3910.41	102692.23
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27695.38	27695.38
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee

Report Covering the Period: From: ^M11 ^D23 ^Y2004 To: ^M12 ^D31 ^Y2004

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)	13200.00	
(ii) Unitemized	7170.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	20370.00	80484.00
(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)	20370.00	80484.00
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.)	28.55	54.52
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))	20398.55	80538.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20398.55	80538.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-4000.00	96500.00
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	89.59	6192.23
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	-3910.41	102692.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	-3910.41	102692.23

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	20370.00	80484.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20370.00	80484.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Patrick H. Burkhardt		Date of Receipt M / D / Y 11 / 23 / 2004
Mailing Address 111B Whitehall Street		Transaction ID: 10391709
City Maryville	State TN	Zip Code 37803-2814
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Cyndi Jill Yag-Howard		Date of Receipt M / D / Y 12 / 06 / 2004
Mailing Address 134D Pelican Avenue		Transaction ID: 10479846
City Naples	State FL	Zip Code 34102-3479
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 400.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert B. Ash		Date of Receipt M / D / Y 12 / 06 / 2004
Mailing Address 4300 West Main Street Suite 102		Transaction ID: 10479847
City Dothan	State AL	Zip Code 36305-1054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	900.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 10

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Susan H. Weinkle		Date of Receipt M / D / Y 12 / 09 / 2004
Mailing Address 2423 Landing Circle		Transaction ID: 10479972
City Bradenton	State FL	Zip Code 34209-9675
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Martin Gary Sands		Date of Receipt M / D / Y 12 / 09 / 2004
Mailing Address 1105 Oak Park Boulevard		Transaction ID: 10479971
City Cedar Falls	State IA	Zip Code 50613-1553
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. G. William Henke		Date of Receipt M / D / Y 12 / 09 / 2004
Mailing Address 5125 Green Braes East Drive		Transaction ID: 10479957
City Indianapolis	State IN	Zip Code 46234-2515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 1250.00
Receipt For: Primary General Other (specify) ▼		

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8/10

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. C. Ralph Daniel		Date of Receipt M / D / Y 12 / 08 / 2004
Mailing Address 138 Oakhurst Trail		Transaction ID: 10479955
City Ridgeland	State MS	Zip Code 39157-8608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Steven P. Rosenberg		Date of Receipt M / D / Y 12 / 08 / 2004
Mailing Address 470 Columbia Drive Suite 102-A		Transaction ID: 10479968
City West Palm Beach	State FL	Zip Code 33409-1897
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Palm Beach Dermatology	Occupation Physician	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kenneth Alan Rosen		Date of Receipt M / D / Y 12 / 13 / 2004
Mailing Address 9000 SW 87th Court Number 202		Transaction ID: 10479973
City Miami	State FL	Zip Code 33178-2231
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Alan C. Harrington		Date of Receipt M / D / Y 12 / 13 / 2004
Mailing Address 791 B Greentree Road		Transaction ID: 10479977
City Bethesda	State MD	Zip Code 20817-1302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Sandra L. Read		Date of Receipt M / D / Y 12 / 13 / 2004
Mailing Address 8915 Radnor Road		Transaction ID: 10481053
City Bethesda	State MD	Zip Code 20817-6328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mirelle Claude Algal		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 7534 East Camino Amistoso		Transaction ID: 10479897
City Tucson	State AZ	Zip Code 85750-7088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 19

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Norman Miners		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 4801 North 33 Court		Transaction ID: 10480006
City Hollywood	State FL	Zip Code 33021-2318
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. George R. Woodbury, JR.		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 211B Kirby Rd		Transaction ID: 10481036
City Memphis	State TN	Zip Code 38119-5510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kristine A. Hase		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 1401 Hawksview Drive		Transaction ID: 10481052
City Marion	State IN	Zip Code 46552-1584
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	700.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 19

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. David C. Rada		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 4320 Warnall Road Suite 728		Transaction ID: 10481042
City Kansas City	State MO	Zip Code 64111-5841
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James Todd Williams		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 1871 Queens Meadow Ct		Transaction ID: 10481041
City Asheboro	State NC	Zip Code 27205-8797
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Richard Lawrence Miller		Date of Receipt M / D / Y 12 / 14 / 2004
Mailing Address 6 Tallmadge Gate		Transaction ID: 10479880
City Setauket	State NY	Zip Code 11733-1418
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

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

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

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

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FOR LINE NUMBER: PAGE 12 / 19
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Keny M. Stefan		Date of Receipt M / D / Y 12 / 16 / 2004
Mailing Address 3008 Baucom Road Suite 100		Transaction ID: 10481022
City Charlotte	State NC	Zip Code 28269-6762
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Margaret E. Olsen		Date of Receipt M / D / Y 12 / 16 / 2004
Mailing Address 11600 Wilshire Boulevard Suite 406		Transaction ID: 10481023
City Los Angeles	State CA	Zip Code 90025-1704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mitchell A. Kline		Date of Receipt M / D / Y 12 / 16 / 2004
Mailing Address 1725 York Avenue Number 24B		Transaction ID: 10481028
City New York	State NY	Zip Code 10128-7807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

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

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

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FOR LINE NUMBER: PAGE 13 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Joseph J. Zalatoris, JR.		Date of Receipt M / D / Y Y Y Y 12 / 16 / 2004
Mailing Address 181 D Knollwood Road		Transaction ID: 10481024
City Bethlehem	State PA	Zip Code 18015-5531
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Melvin Fross Goralick		Date of Receipt M / D / Y Y Y Y 12 / 21 / 2004
Mailing Address 281 El Dorado Street Suite 101		Transaction ID: 10482324
City Monterey	State CA	Zip Code 93940-2911
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John F. Gebhard		Date of Receipt M / D / Y Y Y Y 12 / 21 / 2004
Mailing Address 11 Portuguese Bend Road		Transaction ID: 10482317
City Rolling Hills	State CA	Zip Code 90274-5072
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Dwight R. Tribelhorn		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 1085 Kristen Drive		Transaction ID: 10492314
City Medford	State OR	Zip Code 97504-8516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jeffrey Jay Heller		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 511 North Clyde Morris Boulevard		Transaction ID: 10492315
City Daytona Beach	State FL	Zip Code 32114-2323
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John L. Melsenheimer, JR.		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 6845 Laka Cane Drive		Transaction ID: 10492322
City Orlando	State FL	Zip Code 32819-7721
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

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 15 / 19

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Janet A. May		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 835 Madison Avenue		Transaction ID: 10492323
City New York	State NY	Zip Code 10022-1009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jennifer L. Vespar		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 2171 Oceanview Drive		Transaction ID: 10492321
City Tierra Verde	State FL	Zip Code 33715-2513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael D. White		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 588 Indian Trail Road		Transaction ID: 10492320
City Danville	State VA	Zip Code 24540-5217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Danville Dermatology Associates, Inc.	Occupation Physician	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

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

FOR LINE NUMBER: PAGE 16 / 19
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert V. Kolbusz		Date of Receipt M / D / Y 12 / 22 / 2004	
Mailing Address 1 Robin Hood Ranch		Transaction ID: 10515745	
City	State	Zip Code	Amount of Each Receipt this Period 250.00
Oak Brook	IL	60523-2790	
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	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	13200.00

**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)

PAGE 17 / 19

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

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. The Marty Meehan For Congress Committee

Mailing Address 75 Princeton Street

City No. Chelmsford State MA Zip Code 01863

Purpose of Disbursement
Voided check - check never cashed

Candidate Name
Rep. Martin Meehan

Office Sought: House Senate President
Disbursement For: 2002
Primary General
Other (specify) ▼

State: MA District 5

011
Category/
Type

Transaction ID: 10558871

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

-1000.00

Voided check - check never cashed

Full Name (Last, First, Middle Initial)

B. Dole 2002 Committee

Mailing Address Post Office Box 2108

City Salisbury State NC Zip Code 28145

Purpose of Disbursement
Void check - check never cashed

Candidate Name
Elizabeth Dole

Office Sought: House Senate President
Disbursement For: 2002
Primary General
Other (specify) ▼

State: NC District 2

011
Category/
Type

Transaction ID: 10558754

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

-2000.00

Void check - check never cashed

Full Name (Last, First, Middle Initial)

C. Jesse Jackson Jr For Congress Committee

Mailing Address 7016 S. Euclid Avenue

City Chicago State IL Zip Code 60649

Purpose of Disbursement
Voided check - check never cashed

Candidate Name
Rep. Jesse Jackson, Jr.

Office Sought: House Senate President
Disbursement For: 2002
Primary General
Other (specify) ▼

State: IL District 2

011
Category/
Type

Transaction ID: 10558831

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

-1000.00

Voided check - check never cashed

SUBTOTAL of Disbursements This Page (optional) ▶

-4000.00

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

-4000.00

**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)

PAGE 18 / 19

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

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank One Checking

Mailing Address 111 East Busse Avenue

City Mount Prospect State IL Zip Code 60056

Purpose of Disbursement

Candidate Name

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

001
Category/
Type

Transaction ID: 10461868

Date of Disbursement

11 / 30 / 2004

Amount of Each Disbursement this Period

129.84

Full Name (Last, First, Middle Initial)

B. Bank One Checking

Mailing Address 111 East Busse Avenue

City Mount Prospect State IL Zip Code 60056

Purpose of Disbursement

Candidate Name

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

001
Category/
Type

Transaction ID: 10550452

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

15.75

Full Name (Last, First, Middle Initial)

C. Bank One Checking

Mailing Address 111 East Busse Avenue

City Mount Prospect State IL Zip Code 60056

Purpose of Disbursement

Candidate Name

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

001
Category/
Type

Transaction ID: 10550455

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

-50.00

SUBTOTAL of Disbursements This Page (optional) ▶

89.59

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

89.59

Form/Schedule: F3XN

For calendar year 2005, the AADA Political Action Committee wishes to file semiannually.

Transaction ID:
