

**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  
 Federation of American Hospitals FedPac, a Political Action Committee

ADDRESS (number and street) **801 Pennsylvania Avenue, NW**  
**Suite 245**  
 Check if different than previously reported. (ACC) **Washington DC 20004 2804**

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

C00002261 3. IS THIS REPORT  NEW (N) OR AMENDED (A)

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

5. Covering Period 11 01 2001 through 11 30 2001

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sylvia Ulrich  
 Signature of Treasurer Electronically Filed by Sylvia Ulrich Date 12 19 2001

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name  
Federation of American Hospitals FedPac, a Political Action Committee

Report Covering the Period: From: <sup>W</sup>11 <sup>D</sup>01 <sup>Y</sup>2001 To: <sup>W</sup>11 <sup>D</sup>30 <sup>Y</sup>2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>W</sup> <sup>Y</sup> 2001		95427.29
(b) Cash on Hand at Beginning of Reporting Period .....	128278.72	
(c) Total Receipts (from Line 19) .....	5413.45	128464.75
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	133692.17	223892.04
7. Total Disbursements (from Line 30) .....	28725.29	118925.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	104966.88	104966.88
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 800-426-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

Federation of American Hospitals FedPac, a Political Action Committee

Report Covering the Period: From: <sup>MM</sup>11 <sup>DD</sup>01 <sup>YYYY</sup>2001 To: <sup>MM</sup>11 <sup>DD</sup>30 <sup>YYYY</sup>2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4000.00	
(ii) Unitemized .....	1250.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5250.00	109275.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) .....	5250.00	124275.00
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 36, page 4) .....	35.00	1278.51
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	128.45	2911.24
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	5413.45	128464.75
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	5413.45	128464.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Revised 1/2001)

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.....	35.00	4226.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	35.00	4226.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28690.29	114509.27
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	189.41
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	28725.29	118925.16
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	28725.29	118925.16
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	5250.00	124275.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	5250.00	124275.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	35.00	4226.48
36. Offsets to Operating Expenditures (from Line 15, page 3).....	35.00	1278.51
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	0.00	2947.97

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial)

A. Craig C. Amin

Mailing Address

23510 Bardon Street

City

State

Zip Code

Woodland Hills

CA

91367-3004

Date of Receipt

MM / DD / YYYY  
11 / 30 / 2001

Amount of Each Receipt this Period

500.00

FEC ID number of contributing  
federal political committee.

Name of Employer  
Tenet Healthcare Corp.

Occupation

VP, Govt. Programs

Receipt For: 2002

Aggregate Year-to-Date ▼

Primary  General

Other (specify) ▼

500.00

Transaction ID: SA11A1.4904

Full Name (Last, First, Middle Initial)

B. Alan R. Ewert

Mailing Address

396 Hot Springs Road

City

State

Zip Code

Santa Barbara

CA

93108

Date of Receipt

MM / DD / YYYY  
11 / 30 / 2001

Amount of Each Receipt this Period

1000.00

FEC ID number of contributing  
federal political committee.

Name of Employer  
Tenet Healthcare Corp.

Occupation

EVP-Human Resources

Receipt For: 2002

Aggregate Year-to-Date ▼

Primary  General

Other (specify) ▼

1000.00

Transaction ID: SA11A1.4900

Full Name (Last, First, Middle Initial)

C. Reynold Jennings

Mailing Address

585 Owl Creek Drive

City

State

Zip Code

Powder Springs

GA

30127

Date of Receipt

MM / DD / YYYY  
11 / 27 / 2001

Amount of Each Receipt this Period

1500.00

FEC ID number of contributing  
federal political committee.

Name of Employer  
Tenet Healthcare

Occupation

EVP Operations

Receipt For: 2002

Aggregate Year-to-Date ▼

Primary  General

Other (specify) ▼

1500.00

Transaction ID: SA11A1.4890

**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	FOR LINE NUMBER: (check only one)		PAGE 6 / 14	
	<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)  
Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial)  
**A. Stephen Newman, M.D.**

Mailing Address  
2601 LaBare Lane

City State Zip Code  
Metairie LA 70001

Date of Receipt  
N M / D E / Y Y Y Y  
11 / 27 / 2001

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Tenet Health System SVP

Receipt For: 2002 Aggregate Year-to-Date ▼  
X Primary General 500.00  
Other (specify) ▼

Transaction ID: SA11A1.4882

Full Name (Last, First, Middle Initial)  
**B. Michael E. Tyson**

Mailing Address  
1135 Bridgemill Avenue

City State Zip Code  
Canton GA 30114

Date of Receipt  
N M / D E / Y Y Y Y  
11 / 28 / 2001

Amount of Each Receipt this Period  
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Tenet Healthcare SVP Finance

Receipt For: 2002 Aggregate Year-to-Date ▼  
X Primary General 500.00  
Other (specify) ▼

Transaction ID: SA11A1.4886

**C.**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>4000.00</b>

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

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

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NAME OF COMMITTEE (In Full)  
Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial)  
A. First Union National Bank Date of Receipt  
Mailing Address  
One First Union Center CAP Department N M / D E / Y Y Y Y  
Charlotte NC 28288-1164 11 30 2001  
Amount of Each Receipt this Period  
FEC ID number of contributing federal political committee. 128.45  
Name of Employer Occupation Interest  
Receipt For: 2001 Aggregate Year-to-Date ▼  
Primary General  
X Other (specify) ▼ 2911.24  
n/a Transaction ID: SA17.4912

B.

C.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>128.45</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>128.45</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. BERKLEY FOR CONGRESS</b>		Date of Disbursement 11 / 14 / 2001	
Mailing Address 3069 CONQUISTA COURT City: LAS VEGAS      State: NV      Zip Code: 89121		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement D-NV-1		Category/ Type	
Candidate Name SHELLEY BERKLEY			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: NV      District: 01	Transaction ID: SB23.4741		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER COX CONGRESSIONAL COMMITTEE</b>		Date of Disbursement 11 / 15 / 2001	
Mailing Address PO BOX 8708-C City: NEWPORT BEACH      State: CA      Zip Code: 92658		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement R-CA-47		Category/ Type	
Candidate Name CHRISTOPHER COX			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: CA      District: 48	Transaction ID: SB23.4833		

Full Name (Last, First, Middle Initial) <b>C. DAVE HOBSON FOR CONGRESS</b>		Date of Disbursement 11 / 14 / 2001	
Mailing Address 3323 N. Washington Blvd. City: Arlington      State: VA      Zip Code: 22201		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement R-OH-7		Category/ Type	
Candidate Name Rep. Dave Hobson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼		
State: OH      District: 7	Transaction ID: SB23.4821		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. DEVIN NUNES FOR CONGRESS 2002</b>		Date of Disbursement 11 / 30 / 2001
Mailing Address PO BOX 891 City PIXLEY State CA Zip Code 93256		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement R-CA-21		Transaction ID: SB23.4908
Candidate Name DEVIN GERALD NUNES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: CA      District: 21	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF MAX CLELAND FOR THE US SENATE INC</b>		Date of Disbursement 11 / 16 / 2001
Mailing Address 3148 NORTHEAST EXPRESSWAY P O BOX 7843 City ATLANTA State CA Zip Code 30341		Amount of Each Disbursement this Period -1000.00
Purpose of Disbursement Check no. 6365 dated 7/13 not cashed		Transaction ID: SB23.4752
Candidate Name JOSEPH MAXWELL CLELAND		
Office Sought:      House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: GA      District: 00	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF MAX CLELAND FOR THE US SENATE INC</b>		Date of Disbursement 11 / 26 / 2001
Mailing Address 3148 NORTHEAST EXPRESSWAY P O BOX 7843 City ATLANTA State GA Zip Code 30341		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Check replacement for voided #6365		Transaction ID: SB23.4753
Candidate Name JOSEPH MAXWELL CLELAND		
Office Sought:      House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: GA      District: 00	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Federation of American Hospitals FedPac, a Political Action Committee

<p><b>A. FRIENDS OF SENATOR ROCKEFELLER</b></p> <p>Full Name (Last, First, Middle Initial) FRIENDS OF SENATOR ROCKEFELLER</p> <p>Mailing Address 236 MASSACHUSETTS AVENUE #310 City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement D-WV</p> <p>Candidate Name JOHN DAVISON IV ROCKEFELLER</p> <p>Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: WV District: 00</p> <p>Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Disbursement 11 / 15 / 2001</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Transaction ID: SB23.4835</p>
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<p><b>B. GORDON SMITH FOR U S SENATE</b></p> <p>Full Name (Last, First, Middle Initial) GORDON SMITH FOR U S SENATE</p> <p>Mailing Address 228 S WASHINGTON STREET SUITE 200 City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement R-OR</p> <p>Candidate Name GORDON HAROLD SMITH</p> <p>Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: OR District: 00</p> <p>Disbursement For: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Disbursement 11 / 16 / 2001</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Transaction ID: SB23.4844</p>
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<p><b>C. HCA INC. GOOD GOVERNMENT FUND</b></p> <p>Full Name (Last, First, Middle Initial) HCA INC. GOOD GOVERNMENT FUND</p> <p>Mailing Address 310 25th Avenue North City NASHVILLE State TN Zip Code 37203</p> <p>Purpose of Disbursement In Kind/RT Airfare</p> <p>Candidate Name NANCY L JOHNSON</p> <p>Office Sought: House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: CT District: 08</p> <p>Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Date of Disbursement 11 / 26 / 2001</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p>Transaction ID: SB23.4863</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>	<p><b>4800.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Federation of American Hospitals FedPac, a Political Action Committee

<p>Full Name (Last, First, Middle Initial) <b>A. HEATHER WILSON FOR CONGRESS</b></p>		<p>Date of Disbursement 11 / 15 / 2001</p>	
<p>Mailing Address PO BOX 14070 City: ALBUQUERQUE State: NM Zip Code: 87191</p>		<p>Amount of Each Disbursement this Period 1000.00</p>	
<p>Purpose of Disbursement R-NM-1</p>		<p>Category/ Type</p>	
<p>Candidate Name HEATHER A WILSON</p>		<p>Transaction ID: SB23.483B</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p>		
<p>State: NM District: 01</p>			

<p>Full Name (Last, First, Middle Initial) <b>B. HUTCHINSON FOR SENATE</b></p>		<p>Date of Disbursement 11 / 15 / 2001</p>	
<p>Mailing Address PO BOX 1150 City: Little Rock State: AR Zip Code: 72203</p>		<p>Amount of Each Disbursement this Period 1000.00</p>	
<p>Purpose of Disbursement R-AR</p>		<p>Category/ Type</p>	
<p>Candidate Name TIM HUTCHINSON</p>		<p>Transaction ID: SB23.4837</p>	
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p>		
<p>State: AR District: 00</p>			

<p>Full Name (Last, First, Middle Initial) <b>C. Mainstream America PAC</b></p>		<p>Date of Disbursement 11 / 15 / 2001</p>	
<p>Mailing Address 110B Broad Street City: Falls Church State: VA Zip Code: 22046</p>		<p>Amount of Each Disbursement this Period 1500.00</p>	
<p>Purpose of Disbursement PAC to PAC</p>		<p>Category/ Type</p>	
<p>Candidate Name</p>		<p>Transaction ID: SB23.4829</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: Primary General <input checked="" type="checkbox"/> Other (specify) ▼ n/a</p>		
<p>State: District:</p>			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. MCCONNELL SENATE COMMITTEE '02</b>		Date of Disbursement 11 / 15 / 2001
Mailing Address 400 North Capitol Street NW #585 City State Zip Code Washington DC 20001		Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement R-KY		Transaction ID: SB23.4841
Candidate Name MITCH MCCONNELL		
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: KY      District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. MIKE MCINTYRE FOR CONGRESS</b>		Date of Disbursement 11 / 14 / 2001
Mailing Address PO BOX 1 City State Zip Code LUMBERTON NC 28358		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement D-NC-7		Transaction ID: SB23.4823
Candidate Name MIKE MCINTYRE		
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: <input checked="" type="checkbox"/> Primary      General Other (specify) ▼	
State: NC      District: 07	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL LEADERSHIP PAC</b>		Date of Disbursement 11 / 14 / 2001
Mailing Address 2850 Connecticut Avenue N.W. City State Zip Code Washington DC 20008		Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Pac to Pac		Transaction ID: SB23.4739
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary      General <input checked="" type="checkbox"/> Other (specify) ▼ n/a	
State:      District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
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NAME OF COMMITTEE (In Full)

Federation of American Hospitals FedPac, a Political Action Committee

<p>Full Name (Last, First, Middle Initial) <b>A. NORWOOD FOR CONGRESS</b></p>		<p>Date of Disbursement 11 / 14 / 2001</p>	
<p>Mailing Address CLAUSSEN ROAD City AUGUSTA State GA Zip Code 30907</p>		<p>Amount of Each Disbursement this Period 1000.00</p>	
<p>Purpose of Disbursement R-GA-10</p>		<p>Category/ Type</p>	
<p>Candidate Name CHARLES WHITLOW NORWOOD</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House Senate President</p>	<p>Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p>		
<p>State: GA District: 10</p>	<p>Transaction ID: SB23.4827</p>		

<p>Full Name (Last, First, Middle Initial) <b>B. RE-ELECT NANCY JOHNSON TO CONGRESS</b></p>		<p>Date of Disbursement 11 / 26 / 2001</p>	
<p>Mailing Address PO BOX 1988 City NEW BRITAIN State CT Zip Code 06050</p>		<p>Amount of Each Disbursement this Period 3700.00</p>	
<p>Purpose of Disbursement R-CT-6</p>		<p>Category/ Type</p>	
<p>Candidate Name NANCY L JOHNSON</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House Senate President</p>	<p>Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) ▼</p>		
<p>State: CT District: 06</p>	<p>Transaction ID: SB23.4849</p>		

<p>Full Name (Last, First, Middle Initial) <b>C. Ritz Carlton</b></p>		<p>Date of Disbursement 11 / 19 / 2001</p>	
<p>Mailing Address 100 South Ocean Blvd. City Manalapan State FL Zip Code 33462</p>		<p>Amount of Each Disbursement this Period 2190.29</p>	
<p>Purpose of Disbursement In-Kind Room/Food</p>		<p>Category/ Type</p>	
<p>Candidate Name NANCY L JOHNSON</p>			
<p>Office Sought: <input checked="" type="checkbox"/> House Senate President</p>	<p>Disbursement For: <input checked="" type="checkbox"/> Primary General Other (specify) ▼</p>		
<p>State: CT District: 0</p>	<p>Transaction ID: SB23.4745</p>		

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **6890.29**

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Federation of American Hospitals FedPac, a Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. THURMAN FOR CONGRESS</b>		Date of Disbursement 11 / 16 / 2001	
Mailing Address 3610 38th Street, NW #F270 City Washington State DC Zip Code 20016		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement D-FL-5		Category/ Type	
Candidate Name KAREN L THURMAN			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: FL      District: 05	Transaction ID: SB23.4843		

Full Name (Last, First, Middle Initial) <b>B. WHITFIELD FOR CONGRESS COMMITTEE</b>		Date of Disbursement 11 / 15 / 2001	
Mailing Address P.O. BOX 391 City HOPKINSVILLE State KY Zip Code 42241		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement R-KY-1		Category/ Type	
Candidate Name EDWARD WHITFIELD			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		
State: KY      District: 01	Transaction ID: SB23.4831		

**C.**

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>28690.29</b>