24961792743

07/14/2004 10 : 34

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

Physical Therapy Political Action Committee

ADDRESS (number and street) ▼ 1111 North Fairfax Street

Check if different than previously reported. (ACC)

CITY ▲ Alexandria | STATE ▲ VA | ZIPCODE ▲ 22314

2. **FEC IDENTIFICATION NUMBER** ▼ C00012880

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)
- 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)	x 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 06 01 2004 through 06 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: Dave Mason

Signature of Treasurer: Electronically Filed by Dave Mason — Date 07 14 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)

24961792744

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Physical Therapy Political Action Committee

Report Covering the Period: From: 06 01 2004 To: 06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		342548.21
(b) Cash on Hand at Begining of Reporting Period	356965.92	
(c) Total Receipts (from Line 19)	48211.45	281072.75
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	405177.37	623620.96
7. Total Disbursements (from Line 31)	92854.80	311298.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	312322.57	312322.57
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

Physical Therapy Political Action Committee

Report Covering the Period: From: 06 01 2004 To: 06 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)	17819.50	
(ii) Unitemized	30308.75	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	48128.25	280653.84
(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) ▶	48128.25	280653.84
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.)	83.20	418.91
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))	48211.45	281072.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48211.45	281072.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	17.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	17.22
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	89654.80	308081.17
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	3200.00	3200.00
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))	92854.80	311298.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	92854.80	311298.39

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	48128.25	280653.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48128.25	280653.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	17.22
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	17.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sandra Aronson
Mailing Address 1627 Jasberg Street
City: Hancock | State: MI | Zip Code: 49930-1219
FEC ID number of contributing federal political committee: C
Name of Employer: Superior Home Care
Occupation: Physical Therapist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 204.00

Date of Receipt: 06 21 2004
Transaction ID: 0713200459C94231
Amount of Each Receipt this Period: 40.00
Receipt

B. Full Name (Last, First, Middle Initial)
Mary Bailey
Mailing Address 844 N Clover Court
City: Brea | State: CA | Zip Code: 92821-3420
FEC ID number of contributing federal political committee: C
Name of Employer: Western University - PT Dept
Occupation: Physical Therapist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93887
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jane Baldwin
Mailing Address 12 Ninth Street Apt 603
City: Medford | State: MA | Zip Code: 02155-5165
FEC ID number of contributing federal political committee: C
Name of Employer: Spaulding Rehab Hospital
Occupation: Physical Therapist
Receipt For: Primary General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 22 2004
Transaction ID: D7132D0459C94263
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **190.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Diane Barrickman
Mailing Address 402 Vista De La Playa
City: Santa Barbara | State: CA | Zip Code: 93109-1701
FEC ID number of contributing federal political committee: C
Name of Employer: Attach Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 568.28

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94083
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Donald Berlyn
Mailing Address 1993 W Meteor Dr
City: Flagstaff | State: AZ | Zip Code: 86001-1144
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93917
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Katherine Biggs
Mailing Address 155 Hampshire Drive
City: Hamden | State: CT | Zip Code: 06518-2103
FEC ID number of contributing federal political committee: C
Name of Employer: Quinnipiac University
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 23 2004
Transaction ID: D7132D0459C942B0
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stanley Binkley
Mailing Address 2234 NW Watters Street
City: Roseburg | State: OR | Zip Code: 97470-1764
FEC ID number of contributing federal political committee: C
Name of Employer: VA of Roseburg
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 07 2004
Transaction ID: 061820044C93761
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Keith Blasingame
Mailing Address ProActive Physical Therapy Centers
10223 W Broadway Suite B
City: Pearland | State: TX | Zip Code: 77584-7881
FEC ID number of contributing federal political committee: C
Name of Employer: ProActive Physical Therapy Cen
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93885
Amount of Each Receipt this Period: 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
John Bonaroti
Mailing Address 5594 Fieldstream Drive
City: Export | State: PA | Zip Code: 15632-9219
FEC ID number of contributing federal political committee: C
Name of Employer: East Suburban Sports Medi-cine
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D044C94082
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Debora Bormann
Mailing Address 1115 North Gilbert Avenue
City: Casa Grande | State: AZ | Zip Code: 85222-3541
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist Assistant
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 210.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94091
Amount of Each Receipt this Period: 25.00
Receipt

B. Full Name (Last, First, Middle Initial)
Joann Brooks
Mailing Address 14 Salt Meadows
City: Hampton | State: NH | Zip Code: 03842-1447
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 02 2004
Transaction ID: 061820044C93519
Amount of Each Receipt this Period: 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Caldwell
Mailing Address 5560 Pine Valley Dr.
City: Zanesville | State: OH | Zip Code: 43701-6880
FEC ID number of contributing federal political committee: C
Name of Employer: Southeastern Medical
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 335.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D044C94093
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **375.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stephen Campbell
Mailing Address 2103 Bay Club Dr
City: Arlington | State: TX | Zip Code: 76013-5207
FEC ID number of contributing federal political committee: C
Name of Employer: Onsite Rehab Services
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 06 23 2004
Transaction ID: 0713200459C94274
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Steven Cassabaum
Mailing Address 62944 Sunset Drive
City: Nevada | State: IA | Zip Code: 50201-7947
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93869
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Geraldine Chambers
Mailing Address 9251 39th Ave S
City: Seattle | State: WA | Zip Code: 98118-4828
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 02 2004
Transaction ID: D6182D044C93528
Amount of Each Receipt this Period: 125.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **325.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Clark
Mailing Address 2386 Scenic View Drive
City: Adel | State: IA | Zip Code: 50003-8195
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 22 2004
Transaction ID: 0713200459C94264
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Anne Coffman
Mailing Address 12810 West Meadow Lane
City: New Berlin | State: WI | Zip Code: 53151-1834
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 06 23 2004
Transaction ID: 0713200459C94278
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jonathan Cooperman
Mailing Address 4797 Sherman Rd
City: Kent | State: OH | Zip Code: 44240-7054
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93875
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 350.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph Corcoran
Mailing Address 30 South Valley Road
Suite 102
City: Paoli | State: PA | Zip Code: 19301-1450
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 16 2004
Transaction ID: 061820045C94112
Amount of Each Receipt this Period: 125.00
Receipt

B. Full Name (Last, First, Middle Initial)
Alan Crothers
Mailing Address 2791 S Ten Mile Road
City: Meridian | State: ID | Zip Code: 83642-6509
FEC ID number of contributing federal political committee: C
Name of Employer: Idaho Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93877
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Thomas DiAngelis
Mailing Address 5230 Kings Mills Rd
City: Mason | State: OH | Zip Code: 45040-2319
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93867
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **325.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cynthia Driskell
Mailing Address Foothills Physical Therapy
100 Easy Street Suite B
City: Carefree | State: AZ | Zip Code: 85377-9600
FEC ID number of contributing federal political committee: C
Name of Employer: Foothills Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 16 2004
Transaction ID: 061820045C94119
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Patricia Evans
Mailing Address 160 Winesap Dr
City: Brentwood | State: CA | Zip Code: 94513-5907
FEC ID number of contributing federal political committee: C
Name of Employer: CA APTA
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 06 23 2004
Transaction ID: 0713200459C94273
Amount of Each Receipt this Period: 125.00
Receipt

C. Full Name (Last, First, Middle Initial)
Zoe Feckelman
Mailing Address Lake Country Physical Therapy & Sp
PC 241 Parish St Ste A
City: Canandaigua | State: NY | Zip Code: 14424-
FEC ID number of contributing federal political committee: C
Name of Employer: Lake Country Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D044C94075
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **675.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Elee Fairhart
Mailing Address PO Box B
City: Morton | State: WA | Zip Code: 98356-0009
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 25 2004
Transaction ID: 071320040C94440
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Patricia Farmer
Mailing Address 12608 Davan Dr
City: Silver Spring | State: MD | Zip Code: 20904-3503
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93860
Amount of Each Receipt this Period: 40.00
Receipt

C. Full Name (Last, First, Middle Initial)
Helena Fearon
Mailing Address 5226 East Via Buena Vista
City: Paradise Valley | State: AZ | Zip Code: 85253-2122
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 5000.00

Date of Receipt: 06 02 2004
Transaction ID: D6182D044C93532
Amount of Each Receipt this Period: 2500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **2790.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Pauline Flesch
Mailing Address Clarian Health Partners
1701 N. Senate Ave.
City: Indianapolis | State: IN | Zip Code: 46202-5306
FEC ID number of contributing federal political committee: C
Name of Employer: Clarian Health Partners
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 1035.00

Date of Receipt: 06 24 2004
Transaction ID: 071320040C94376
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Kathleen Galice-Devine
Mailing Address 4141 S Tamiami Trail
City: Sarasota | State: FL | Zip Code: 34231-3600
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93866
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Gangemi
Mailing Address 421 Woodluck Dr
City: Sarasota | State: FL | Zip Code: 34236-1823
FEC ID number of contributing federal political committee: C
Name of Employer: Sunshine Therapy Assoc.
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 29 2004
Transaction ID: D7132D040C9450D
Amount of Each Receipt this Period: 500.00
Receipt

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 16 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gayle Garnett
Mailing Address Rockingham Memorial Hospital
235 Cantrell Ave
City: Harrisonburg | State: VA | Zip Code: 22801-3248
FEC ID number of contributing federal political committee. C
Name of Employer: Rockingham Memorial Hospital
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93895
Amount of Each Receipt this Period: 50.00
Receipt

B. Full Name (Last, First, Middle Initial)
Paul Gasper
Mailing Address 780 Garden View Ct
City: Encinitas | State: CA | Zip Code: 92024-2464
FEC ID number of contributing federal political committee. C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93892
Amount of Each Receipt this Period: 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Rick Gawenda
Mailing Address 7913 Creek Bend Drive
City: Ypsilanti | State: MI | Zip Code: 48197-6204
FEC ID number of contributing federal political committee. C
Name of Employer: Detroit Medical Center
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 235.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D044C94087
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ann Giffin
Mailing Address Box 52 Utmck
1924 Alcoa Hwy
City: Knoxville | State: TN | Zip Code: 37901-0052
FEC ID number of contributing federal political committee: C
Name of Employer: University of Tennessee Medica
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 218.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93903
Amount of Each Receipt this Period: 42.00
Receipt

B. Full Name (Last, First, Middle Initial)
Patrick Graham
Mailing Address Po Box 8089
City: Columbus | State: GA | Zip Code: 31909-3526
FEC ID number of contributing federal political committee: C
Name of Employer: Rehab Services of Columbus
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 1283.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93904
Amount of Each Receipt this Period: 208.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jennie Gregory
Mailing Address 1002 Abercorn Place
City: Sherwood | State: AR | Zip Code: 72120-6502
FEC ID number of contributing federal political committee: C
Name of Employer: St. Vincent Health System
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 450.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D045C94115
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 350.00

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 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeanine Gunn
Mailing Address 8670 Loveland-Miamiville Rd
City: Loveland | State: OH | Zip Code: 45140-8732
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 535.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93886
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Linda Guth Stangl
Mailing Address Saint Louis University
School of Allied Health Profession
City: Saint Louis | State: MO | Zip Code: 63104-1111
FEC ID number of contributing federal political committee: C
Name of Employer: Saint Louis University
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 15 2004
Transaction ID: 061820044C94073
Amount of Each Receipt this Period: 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Patricia Hamilton
Mailing Address PR2 Physical Therapy and Myofascia
5822 Middlebranch Avenue NE
City: Canton | State: OH | Zip Code: 44721-3861
FEC ID number of contributing federal political committee: C
Name of Employer: PR2 Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 255.00

Date of Receipt: 06 23 2004
Transaction ID: D7132D0459C94277
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Belinda Hays
Mailing Address PO Box 1192
City: Seymour | State: IN | Zip Code: 47274-3792
FEC ID number of contributing federal political committee: C
Name of Employer: Progressive PT
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 3000.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93863
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
John Hendrickson
Mailing Address Sport Clinic
8911 N Port Washington Road
City: Milwaukee | State: WI | Zip Code: 53217-1624
FEC ID number of contributing federal political committee: C
Name of Employer: Sport Clinic
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93899
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Judith Hokes
Mailing Address 111 Rothsville Station Road
City: Lititz | State: PA | Zip Code: 17543-8882
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93861
Amount of Each Receipt this Period: 100.00
Receipt

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) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Paul Hildreth
Mailing Address 930 Marengo Street
City: New Orleans | State: LA | Zip Code: 70115-2753
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 16 2004
Transaction ID: 0618200459C94097
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Brian Hopkins
Mailing Address 4616 Henican Pl
City: Metairie | State: LA | Zip Code: 70003-1110
FEC ID number of contributing federal political committee: C
Name of Employer: MED X PT
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 23 2004
Transaction ID: 0713200459C94269
Amount of Each Receipt this Period: 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Mary Pat Jobes
Mailing Address 977 Giaroli
City: Memphis | State: TN | Zip Code: 38122-1534
FEC ID number of contributing federal political committee: C
Name of Employer: Methodist Health
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 220.00

Date of Receipt: 06 23 2004
Transaction ID: D7132D0459C942B1
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Holly Johnson
Mailing Address 34 Fern St, Ivy Hill
City: Harlan | State: KY | Zip Code: 40831-3542
FEC ID number of contributing federal political committee: C
Name of Employer: Kentucky PT
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 07 2004
Transaction ID: 061820044C93802
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Kenneth Johnson
Mailing Address Baltimore Therapeutic Equipment Co
7455-L New Ridge Road
City: Hanover | State: MD | Zip Code: 21076-3143
FEC ID number of contributing federal political committee: C
Name of Employer: Baltimore Therapeutic Equ-ipmen
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93870
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Karla King
Mailing Address 109 Battlefield Dr
City: Winchester | State: VA | Zip Code: 22602-7912
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93872
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Craig Kopet
Mailing Address Highline PT & Sports Clinic
16259 Sylvester Road SW 102
City: Seattle | State: WA | Zip Code: 98166-3094
FEC ID number of contributing federal political committee: C
Name of Employer: Highline PT & Sports Clinic
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94074
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Paul Kraushaar
Mailing Address 1737 Arbor Oaks Drive
City: Muscatine | State: IA | Zip Code: 52761-2623
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93868
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Nancy Krueger
Mailing Address El Cajon Therapy Associates
590 South Magnolia
City: El Cajon | State: CA | Zip Code: 92020-6011
FEC ID number of contributing federal political committee: C
Name of Employer: El Cajon Therapy Associates
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93888
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Victoria Lebenski
Mailing Address 100 Ferris Ave
City: Norwalk | State: CT | Zip Code: 06854-1215
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93876
Amount of Each Receipt this Period: 50.00
Receipt

B. Full Name (Last, First, Middle Initial)
Cynthia Lecouture
Mailing Address 255 Camp St
City: Bristol | State: CT | Zip Code: 06010-5582
FEC ID number of contributing federal political committee: C
Name of Employer: NVCC
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93879
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Michael Land
Mailing Address DBA: Dr. Michael Land Physical The Physical Therapy Specialists Inc.,
City: Foley | State: AL | Zip Code: 36535-2417
FEC ID number of contributing federal political committee: C
Name of Employer: Physical Therapy Specialists I
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93896
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **200.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert Landel
Mailing Address 2900 Greenbriar Avenue
City: Long Beach | State: CA | Zip Code: 90815-1047
FEC ID number of contributing federal political committee: C
Name of Employer: USC
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 16 2004
Transaction ID: 061820045C94151
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Dennis Langton
Mailing Address E&L Associates Physical Therapy
727 Live Oak Drive
City: El Cajon | State: CA | Zip Code: 92020-5623
FEC ID number of contributing federal political committee: C
Name of Employer: E&L Associates Physical Therap
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 670.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93862
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Cynthia Manes
Mailing Address 1218 Dogwood Ln
City: Tyler | State: TX | Zip Code: 75701-5238
FEC ID number of contributing federal political committee: C
Name of Employer: Andrews Center
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 07 2004
Transaction ID: D6182D044C9372D
Amount of Each Receipt this Period: 250.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Judith Mann
Mailing Address 17555 Collins Avenue #2505
City: North Miami Beach | State: FL | Zip Code: 33160-2882
FEC ID number of contributing federal political committee: C
Name of Employer: Parkway Regional Med. Ctr.
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 21 2004
Transaction ID: 0713200459C94224
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Alexander Matz
Mailing Address Matz Orthopedic Physical Therapy
300 41st St
City: Miami Beach | State: FL | Zip Code: 33140-3627
FEC ID number of contributing federal political committee: C
Name of Employer: Matz Orthopedic Physical Thera
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 14 2004
Transaction ID: 061820044C93955
Amount of Each Receipt this Period: 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Stephen McDevitt
Mailing Address At Maine Spine & Rehabilitation
Saco Bay Orthopaedic & Sports PT
City: Scarborough | State: ME | Zip Code: 04074-8928
FEC ID number of contributing federal political committee: C
Name of Employer: Saco Bay Orthopaedic & Sports
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 21 2004
Transaction ID: D7132D0459C941B7
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kenneth Mengel
Mailing Address 9827 Estrella Ave
City: Temple City | State: CA | Zip Code: 91780-1417
FEC ID number of contributing federal political committee: C
Name of Employer: Fortanesce & Associates
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93898
Amount of Each Receipt this Period: 125.00
Receipt

B. Full Name (Last, First, Middle Initial)
R. Manherd
Mailing Address 1020 Margaret Blvd
City: Greenville | State: MS | Zip Code: 38703-6453
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93905
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Susan Michkovitz
Mailing Address 515A W Gravers Lane
City: Philadelphia | State: PA | Zip Code: 19118-4132
FEC ID number of contributing federal political committee: C
Name of Employer: Temple University
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93883
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **275.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Connie Miller
Mailing Address PO Box 6
City: Chelan | State: WA | Zip Code: 98816-0006
FEC ID number of contributing federal political committee: C
Name of Employer: Lake Chelan Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 22 2004
Transaction ID: 0713200459C94261
Amount of Each Receipt this Period: 50.00
Receipt

B. Full Name (Last, First, Middle Initial)
Connie Miller
Mailing Address PO Box 6
City: Chelan | State: WA | Zip Code: 98816-0006
FEC ID number of contributing federal political committee: C
Name of Employer: Lake Chelan Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 25 2004
Transaction ID: 071320040C94407
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Pamela Morrison
Mailing Address 140 West End Ave Suite 1F
City: New York | State: NY | Zip Code: 10023-6149
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 14 2004
Transaction ID: D6182D044C9403B
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 61
(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)
Physical Therapy Political Action Committee

A.
Full Name (Last, First, Middle Initial)
N, Norman
Mailing Address 11144 Hillsboro Ave N
City: Champlin | State: MN | Zip Code: 55316-3128
FEC ID number of contributing federal political committee: C
Name of Employer: Heartland Home Healthcare
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 06 07 2004
Transaction ID: 061820044C93603
Amount of Each Receipt this Period: 25.00
Receipt

B.
Full Name (Last, First, Middle Initial)
Longinus Nwachukwu
Mailing Address 1394 Schenectady Avenue
City: Brooklyn | State: NY | Zip Code: 11203-6532
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 06 14 2004
Transaction ID: 061820044C94031
Amount of Each Receipt this Period: 250.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Michael OKelley
Mailing Address 1519 132nd St SE Suite A
City: Everett | State: WA | Zip Code: 98208-7203
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 06 16 2004
Transaction ID: 061820045C94106
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 375.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Carrie Odom
Mailing Address 3434 Iva Ada Drive
City: Hillsborough | State: NC | Zip Code: 27278-9401
FEC ID number of contributing federal political committee: C
Name of Employer: Duke University
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 252.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94081
Amount of Each Receipt this Period: 42.00
Receipt

B. Full Name (Last, First, Middle Initial)
John Palazzo
Mailing Address Neurolab
4385 Motorway Dr
City: Waterford | State: MI | Zip Code: 48328-3451
FEC ID number of contributing federal political committee: C
Name of Employer: Neurolab
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94077
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Chriss Parks
Mailing Address 100 Park Ave Suite 101
City: Steamboat Springs | State: CO | Zip Code: 80487-5012
FEC ID number of contributing federal political committee: C
Name of Employer: Ctr. for Sports Med & Rehab
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D045C94116
Amount of Each Receipt this Period: 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **342.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Catherine Peris
Mailing Address 19 Dolphin Drive
City: St. Augustine | State: FL | Zip Code: 32080-4530
FEC ID number of contributing federal political committee: C
Name of Employer: University Of St Augustine
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93889
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Amy Pennington
Mailing Address HC1 Box 100
City: Canadian | State: TX | Zip Code: 79014-9720
FEC ID number of contributing federal political committee: C
Name of Employer: Wheeler Nursing & Rehab
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94085
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Lydia Radosevich
Mailing Address Ruidoso PT Clinic
439 Mechem Dr
City: Ruidoso | State: NM | Zip Code: 88345-6813
FEC ID number of contributing federal political committee: C
Name of Employer: Ruidoso PT Clinic
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93873
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **200.00**

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 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sallie Redlske
Mailing Address 397 E Pioneer Ave Suite 2
City: Homer | State: AK | Zip Code: 99603-7693
FEC ID number of contributing federal political committee: C
Name of Employer: Homer PT
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 06 02 2004
Transaction ID: 061820044C93530
Amount of Each Receipt this Period: 62.50
Receipt

B. Full Name (Last, First, Middle Initial)
Deborah Reed
Mailing Address Advanced Rehab Incorporated
1020 C 11th Street
City: Tell City | State: IN | Zip Code: 47586-2130
FEC ID number of contributing federal political committee: C
Name of Employer: Advanced Rehab Incorporated
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 3000.00
Date of Receipt: 06 08 2004
Transaction ID: 061820044C93871
Amount of Each Receipt this Period: 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Freddie Regan
Mailing Address 3221 Ryan St Ste D
City: Lake Charles | State: LA | Zip Code: 70601-6516
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 06 08 2004
Transaction ID: 061820044C93881
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 662.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 61
(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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard Ritter
Mailing Address 28120 Riggs Court
City: Hayward | State: CA | Zip Code: 94542-2438
FEC ID number of contributing federal political committee: C
Name of Employer: Univ. of CA-San Francisco
Occupation: Physical Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 21 2004
Transaction ID: 0713200459C94185
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Nancy Roberge
Mailing Address 173 Bedford Road
City: Lincoln | State: MA | Zip Code: 01773-1512
FEC ID number of contributing federal political committee: C
Name of Employer: Chestnut Hill PT
Occupation: Physical Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 535.00

Date of Receipt: 06 16 2004
Transaction ID: 061820045C94108
Amount of Each Receipt this Period: 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Julie Rosen
Mailing Address 445 Park Ave
City: Glencoe | State: IL | Zip Code: 60022-1527
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 285.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93890
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Roush
Mailing Address 4142 E Campbell Ave
City: Higley | State: AZ | Zip Code: 85236-3915
FEC ID number of contributing federal political committee: C
Name of Employer: ASHS
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93891
Amount of Each Receipt this Period: 50.00
Receipt

B. Full Name (Last, First, Middle Initial)
Joseph Ruhl
Mailing Address 2257 Warner Rd
City: Lansdale | State: PA | Zip Code: 19446-5855
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94076
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Joan Schmidt
Mailing Address Westwood Physical Therapy
11600 Wilshire Blvd Suite LL14
City: Los Angeles | State: CA | Zip Code: 90025-1733
FEC ID number of contributing federal political committee: C
Name of Employer: Westwood Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93894
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jon Schnepel
Mailing Address Cascade Physical Therapy
19201 SE Division Street
City: Gresham | State: OR | Zip Code: 97030-5227
FEC ID number of contributing federal political committee: C
Name of Employer: Cascade Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2500.00

Date of Receipt: 06 02 2004
Transaction ID: 061820044C93520
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Cindy Schwankler
Mailing Address Comprehensive Therapy Services
5677 Oberlin Drive Suite 106
City: San Diego | State: CA | Zip Code: 92121-1741
FEC ID number of contributing federal political committee: C
Name of Employer: Comprehensive Therapy Services
Occupation: Physical Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 16 2004
Transaction ID: 061820044C94086
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jay Segal
Mailing Address 1537 Bent River Circle
City: Birmingham | State: AL | Zip Code: 35216-5394
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93864
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 35 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Richard Smith
Mailing Address Missoula Physical Therapy Ctr
1805 Bancroft St
City: Missoula | State: MT | Zip Code: 59801-5781
FEC ID number of contributing federal political committee: C
Name of Employer: Missoula Physical Therapy Ctr
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 16 2004
Transaction ID: 061820045C94120
Amount of Each Receipt this Period: 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Jill Tomasello
Mailing Address 64 Hunting Ridge Road
City: Stamford | State: CT | Zip Code: 06903-3222
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 06 07 2004
Transaction ID: 061820044C93637
Amount of Each Receipt this Period: 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Brian Town
Mailing Address 1892 Mason Mill Rd
City: Decatur | State: GA | Zip Code: 30033-3424
FEC ID number of contributing federal political committee: C
Name of Employer: Sports Rehab
Occupation: Physical Therapist
Receipt For: Primary General; Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 23 2004
Transaction ID: D7132D0459C94354
Amount of Each Receipt this Period: 250.00
Receipt

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Barbara Tschoepe
Mailing Address 965 Saratoga Ct
City: Boulder | State: CO | Zip Code: 80303-3233
FEC ID number of contributing federal political committee: C
Name of Employer: Regis University
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93884
Amount of Each Receipt this Period: 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Arthur Veilleux
Mailing Address 214 Second Avenue
City: Belmar | State: NJ | Zip Code: 07719-2010
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 210.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93859
Amount of Each Receipt this Period: 35.00
Receipt

C. Full Name (Last, First, Middle Initial)
Pamela White
Mailing Address PO Box 117
City: Signal Mountain | State: TN | Zip Code: 37377-0117
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 285.00

Date of Receipt: 06 08 2004
Transaction ID: D6182D044C93878
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **185.00**

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 37 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kathleen Whooley
Mailing Address 321 N. Larchmont Blvd Ste 825
City: Los Angeles | State: CA | Zip Code: 90004-6400
FEC ID number of contributing federal political committee: C
Name of Employer: Larchmont Physical Therapy
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 06 21 2004
Transaction ID: 0713200459C94186
Amount of Each Receipt this Period: 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Patricia Wilder
Mailing Address University Wisconsin LaCrosse Health Science Center Rm 465
City: La Crosse | State: WI | Zip Code: 54601-1502
FEC ID number of contributing federal political committee: C
Name of Employer: University Wisconsin LaCrosse
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93897
Amount of Each Receipt this Period: 50.00
Receipt

C. Full Name (Last, First, Middle Initial)
Patrice Winter
Mailing Address 3502 Old Post Road
City: Fairfax | State: VA | Zip Code: 22030-2025
FEC ID number of contributing federal political committee: C
Name of Employer: Self-Employed
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 335.00

Date of Receipt: 06 23 2004
Transaction ID: D7132D0459C94279
Amount of Each Receipt this Period: 50.00
Receipt

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 61
(check only one)
X 11a | 11b | 11c | 12 | 13 | 14 | 15 | 16 | 17

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Denise Wise
Mailing Address College of St. Scholastica
1200 Kenwood Ave
City: Duluth | State: MN | Zip Code: 55811-4199
FEC ID number of contributing federal political committee: C
Name of Employer: College of St. Scholastica
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 16 2004
Transaction ID: 061820045C94124
Amount of Each Receipt this Period: 250.00
Receipt

B.
Full Name (Last, First, Middle Initial)
John Yarbrough
Mailing Address Jackson-Madison County General Hos
708 W Forest Ave
City: Jackson | State: TN | Zip Code: 38301-3901
FEC ID number of contributing federal political committee: C
Name of Employer: Jackson-Madison County General
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 370.00

Date of Receipt: 06 08 2004
Transaction ID: 061820044C93893
Amount of Each Receipt this Period: 50.00
Receipt

C.
Full Name (Last, First, Middle Initial)
Letha Zook
Mailing Address Wheeling Jesuit Univ
Dept of Physical Therapy
City: Wheeling | State: WV | Zip Code: 26003-6243
FEC ID number of contributing federal political committee: C
Name of Employer: Wheeling Jesuit Univ
Occupation: Physical Therapist
Receipt For: Primary / General / Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 06 16 2004
Transaction ID: D6182D044C9407B
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	17819.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 61
(check only one)

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

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
SunTrust Bank

Mailing Address Old Town Branch
King Street

City: Alexandria
State: VA
Zip Code: 22314-

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date
418.91

Date of Receipt
06 30 2004

Transaction ID: 071320041C95101

Amount of Each Receipt this Period
83.20

Other Receipt

SUBTOTAL of Receipts This Page (optional)	83.20
TOTAL This Period (last page this line number only)	83.20

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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Coulson Campaign Committee

Mailing Address P.O. Box 2344

City: Glenview | State: IL | Zip Code: 60025-

Purpose of Disbursement: NONFEDERAL CANDIDATE CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D7132D041E151B
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 2900.00

B. Full Name (Last, First, Middle Initial)
Campaign for Duane Dimmitt for25th State

Mailing Address 2107 Meadowvale Court

City: Columbia | State: MO | Zip Code: 65202-

Purpose of Disbursement: NONFEDERAL CANDIDATE CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D7132D041E1462
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 300.00

SUBTOTAL of Disbursements This Page (optional) ▶	3200.00
TOTAL This Period (last page this line number only) ▶	3200.00

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)

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

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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jim Ramstad Volunteer Committee

Mailing Address 1809 S. Plymouth
Suite 310B

City: Hopkins | State: MN | Zip Code: 55305-

Purpose of Disbursement: CONTR. TO REP. RAMSTAD, MN-3 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

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

Transaction ID: D7132D041E1499
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. RAMSTAD, MN-3 (H)

B. Full Name (Last, First, Middle Initial)
People for English

Mailing Address PO Box 1940

City: Erie | State: PA | Zip Code: 16507-

Purpose of Disbursement: CONTR. TO REP. ENGLISH, PA-3 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

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

Transaction ID: D7132D041E1519
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1500.00

CONTR. TO REP. ENGLISH, PA-3 (H)

C. Full Name (Last, First, Middle Initial)
Friends of Sherrod Brown

Mailing Address 807 14th Street, NW
Suite 800

City: Washington | State: DC | Zip Code: 20005-

Purpose of Disbursement: CONTR. TO REP. BROWN, OH-13 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

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

Transaction ID: D7132D041E1468
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. BROWN, OH-13 (H)

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 42 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Dave Camp for Congress

Mailing Address P.O. Box 423

City: Midland | State: MI | Zip Code: 48640-

Purpose of Disbursement: CONTR. TO REP. CAMP, MI-4 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1536
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. CAMP, MI-4 (H)

B. Full Name (Last, First, Middle Initial)
Shelley Berkley for Congress

Mailing Address 3069 Conquista Court

City: Las Vegas | State: NV | Zip Code: 89121-

Purpose of Disbursement: CONTR. TO REP. BERKLEY, NV-1 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1490
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. BERKLEY, NV-1 (H)

C. Full Name (Last, First, Middle Initial)
Norwood for Congress

Mailing Address P.O. Box 489

City: Evans | State: GA | Zip Code: 30809-

Purpose of Disbursement: CONTR. TO REP. NORWOOD, GA-9 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D71320041E1535
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 3000.00

CONTR. TO REP. NORWOOD, GA-9 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **5000.00**

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

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Citizens for Tom Harkin

Mailing Address 426 C Street, NE

City: Washington | State: DC | Zip Code: 20002-

Purpose of Disbursement: CONTR. TO SEN. HARKIN, IA (S)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼ Primary 2008

Transaction ID: D7132D041E1522
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO SEN. HARKIN, IA (S)

B. Full Name (Last, First, Middle Initial)
Upton for All of Us

Mailing Address P.O. Box 480

City: St Joseph | State: MI | Zip Code: 49085-

Purpose of Disbursement: CONTR. TO REP. UPTON, MI-6 (H)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7132D041E1491
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. UPTON, MI-6 (H)

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Cte

Mailing Address 430 S. Capitol Street, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: POLITICAL PARTY CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D7132D041E1530
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 2500.00

POLITICAL PARTY CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 44 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Friends of Lois Capps

Mailing Address 98 Ivy Street, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: CONTR. TO REP. CAPPS, CA-23 (H)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | State: District
Disbursement For: 2004 Primary ☐ X General ☒ Other (specify) ☐

Transaction ID: D7132D041E1467
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. CAPPS, CA-23 (H)

B. Full Name (Last, First, Middle Initial)
Andrews for Congress Committee

Mailing Address Box 295

City: Oaklyn | State: NJ | Zip Code: 08107-

Purpose of Disbursement: CONTR. TO REP. ANDREWS, NJ-1 (H)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | State: District
Disbursement For: 2004 Primary ☐ X General ☒ Other (specify) ☐

Transaction ID: D7132D041E1503
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. ANDREWS, NJ-1 (H)

C. Full Name (Last, First, Middle Initial)
Richard Burr Committee

Mailing Address P.O. Box 5828

City: Winston Salem | State: NC | Zip Code: 27113-

Purpose of Disbursement: CONTR. TO REP. BURR, NC (S)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | State: District
Disbursement For: 2004 X Primary ☒ General ☐ Other (specify) ☐

Transaction ID: D71320041E1485
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 5000.00

CONTR. TO REP. BURR, NC (S)

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 45 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
McCrery for Congress Committee

Mailing Address P.O. Box 52958

City: Shreveport | State: LA | Zip Code: 71135-

Purpose of Disbursement: CONTR. TO REP. MCCRERY, LA-4 (H)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | State: District
Disbursement For: 2004 X Primary ☐ General ☐ Other (specify) ☐

Transaction ID: D7132D041E1507
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 2000.00

CONTR. TO REP. MCCRERY, LA-4 (H)

B. Full Name (Last, First, Middle Initial)
Friends of Cliff Stearns

Mailing Address 4451 Brookfield Corp. Dr.
Suite 200

City: Chantilly | State: VA | Zip Code: 20151-

Purpose of Disbursement: CONTR. TO REP. STEARNS, FL-6 (H)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | State: District
Disbursement For: 2004 X Primary ☐ General ☐ Other (specify) ☐

Transaction ID: D7132D041E152B
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. STEARNS, FL-6 (H)

C. Full Name (Last, First, Middle Initial)
Friends for Baron Hill

Mailing Address P.O. Box 1071

City: Seymour | State: IN | Zip Code: 47274-

Purpose of Disbursement: CONTR. TO REP. HILL, IN-9 (H)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | State: District
Disbursement For: 2004 Primary ☐ X General ☐ Other (specify) ☐

Transaction ID: D71320041E1525
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. HILL, IN-9 (H)

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 46 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Re-Elect McGovern Committee

Mailing Address P.O. Box 60405

City: Worcester | State: MA | Zip Code: 01606-

Purpose of Disbursement: CONTR. TO REP. MCGOVERN, MA-3 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

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

Transaction ID: D7132D041E1492
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. MCGOVERN, MA-3 (H)

B. Full Name (Last, First, Middle Initial)
Lampson for Congress

Mailing Address 38 Ivy Street, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: CONTR. TO REP. LAMPSON, TX-9 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

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

Transaction ID: D7132D041E150D
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 2500.00

CONTR. TO REP. LAMPSON, TX-9 (H)

C. Full Name (Last, First, Middle Initial)
People With Hart

Mailing Address P.O. Box 435

City: Wexford | State: PA | Zip Code: 15090-

Purpose of Disbursement: CONTR. TO REP. HART, PA-4 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President

State: District

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

Transaction ID: D71320041E1538
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. HART, PA-4 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 47 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Grassley Committee

Mailing Address 5327 Holmes Run Pky.

City: Alexandria | State: VA | Zip Code: 22304-

Purpose of Disbursement: CONTR. TO SEN. GRASSLEY, IA (S)

Candidate Name

Category/ Type

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

Disbursement For: 2004 — ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E151D
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 4000.00

CONTR. TO SEN. GRASSLEY, IA (S)

B. Full Name (Last, First, Middle Initial)
Ben Nelson for U.S. Senate Cte.

Mailing Address 420 C Street, NE

City: Washington | State: DC | Zip Code: 20002-

Purpose of Disbursement: CONTR. TO SEN. NELSON, NE (S)

Candidate Name

Category/ Type

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

Disbursement For: 2006 — ☐ Primary ☐ General ☒ Other (specify) Primary 2006

Transaction ID: D7132D041E1541
Date of Disbursement: 06 / 23 / 2004

Amount of Each Disbursement this Period: 1500.00

CONTR. TO SEN. NELSON, NE (S)

C. Full Name (Last, First, Middle Initial)
Mike Ross for Congress Committee

Mailing Address P.O. Box 360

City: Prescott | State: AR | Zip Code: 71857-

Purpose of Disbursement: CONTR. TO REP. ROSS, AR-4 (H)

Candidate Name

Category/ Type

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

Disbursement For: 2004 — ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D71320041E1508
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. ROSS, AR-4 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **6500.00**

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)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Martin Frost Campaign Committee

Mailing Address 6 E Street, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: CONTR. TO REP. FROST, TX-32 (H)

Candidate Name

Category/ Type

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

Disbursement For: 2004 — ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E1532
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 4000.00

CONTR. TO REP. FROST, TX-32 (H)

B. Full Name (Last, First, Middle Initial)
Langevin for Congress

Mailing Address 301 4th Street, NE

City: Washington | State: DC | Zip Code: 20002-

Purpose of Disbursement: CONTR. TO REP. LANGEVIN, RI-2 (H)

Candidate Name

Category/ Type

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

Disbursement For: 2004 — ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D7132D041E1527
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. LANGEVIN, RI-2 (H)

C. Full Name (Last, First, Middle Initial)
John Lewis for Congress

Mailing Address P.O. Box 2323

City: Atlanta | State: GA | Zip Code: 30301-

Purpose of Disbursement: CONTR. TO REP. LEWIS, GA-5 (H)

Candidate Name

Category/ Type

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

Disbursement For: 2004 — ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D71320041E1504
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. LEWIS, GA-5 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **6000.00**

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

PAGE 49 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sam Graves for Congress

Mailing Address 4701 NW 82nd Street

City: Kansas City | State: MO | Zip Code: 64151-

Purpose of Disbursement: CONTR. TO REP. GRAVES, MO-6 (H)

Candidate Name:

Category/ Type:

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2004
☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D71320041E1521
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. GRAVES, MO-6 (H)

B. Full Name (Last, First, Middle Initial)
Friends of Mike Ferguson

Mailing Address P.O. Box 2776

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. FERGUSON, NJ-7 (H)

Candidate Name:

Category/ Type:

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2004
☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D71320041E1483
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. FERGUSON, NJ-7 (H)

C. Full Name (Last, First, Middle Initial)
Crane for Congress

Mailing Address P.O. Box 2778

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. CRANE, IL-8 (H)

Candidate Name:

Category/ Type:

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2004
☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D71320041E1486
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 4000.00

CONTR. TO REP. CRANE, IL-8 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **6000.00**

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

PAGE 50 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Boehner for Congress

Mailing Address 7908-I Cincinnati-Dayton Road

City: West Chester | State: OH | Zip Code: 45069-

Purpose of Disbursement: CONTR. TO REP. BOEHNER, OH-8 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E154D
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 2500.00

CONTR. TO REP. BOEHNER, OH-8 (H)

B. Full Name (Last, First, Middle Initial)
Heather Wilson for Congress

Mailing Address P.O. Box 14070

City: Albuquerque | State: NM | Zip Code: 87191-

Purpose of Disbursement: CONTR. TO REP. H. WILSON, NM-1 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1511
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. H. WILSON, NM-1 (H)

C. Full Name (Last, First, Middle Initial)
Friends of Joe Pitts Committee

Mailing Address P.O. box 2776

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. PITTS, PA-16 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1496
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. PITTS, PA-16 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gerlach for Congress

Mailing Address P.O. Box 2776

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. GERLACH, PA-6 (H)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E1509
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. GERLACH, PA-6 (H)

B. Full Name (Last, First, Middle Initial)
Lincoln Diaz-Balart for Congress

Mailing Address 8770 Sunset Drive Suite 421

City: Miami | State: FL | Zip Code: 33173-

Purpose of Disbursement: CONTR TO REP DIAZ-BALART, FL-21 (H)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D7132D041E1469
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR TO REP DIAZ-BALART, FL-21 (H)

C. Full Name (Last, First, Middle Initial)
Rodney Alexander for Congress

Mailing Address P.O. Box 367

City: Quitman | State: LA | Zip Code: 71268-

Purpose of Disbursement: CONTR. TO REP. ALEXANDER, LA-5 (H)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D7132D041E1494
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. ALEXANDER, LA-5 (H)

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jim Cooper for Congress

Mailing Address 503 Capitol Court, NE
Suite 100

City: Washington | State: DC | Zip Code: 20002-

Purpose of Disbursement: CONTR. TO REP. COOPER. TN-5 (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D71320041E1515
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. COOPER, TN-5 (H)

B. Full Name (Last, First, Middle Initial)
Lincoln Davis for Congress

Mailing Address P.O. Box 350

City: Jamestown | State: TN | Zip Code: 38556-

Purpose of Disbursement: CONTR. TO REP. DAVIS, TN-4 (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D71320041E1531
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. DAVIS, TN-4 (H)

C. Full Name (Last, First, Middle Initial)
Latham for Congress

Mailing Address 209 Pennsylvania Avenue, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: CONTR. TO REP. LATHAM, IA-4 (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D71320041E1526
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. LATHAM, IA-4 (H)

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 53 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sanders for Congress

Mailing Address P.O. Box 391

City: Burlington | State: VT | Zip Code: 05402-

Purpose of Disbursement: CONTR. TO REP. SANDERS, VT (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D7132D041E1542
Date of Disbursement: 06 / 23 / 2004

Amount of Each Disbursement this Period: 500.00

CONTR. TO REP. SANDERS, VT (H)

B. Full Name (Last, First, Middle Initial)
Sanders for Congress

Mailing Address P.O. Box 391

City: Burlington | State: VT | Zip Code: 05402-

Purpose of Disbursement: CONTR. TO REP. SANDERS, VT (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D7132D041E1513
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. SANDERS, VT (H)

C. Full Name (Last, First, Middle Initial)
Chris Chocola for Congress

Mailing Address P.O. Box 2778

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. CHOCOLA, IN-2 (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D71320041E1537
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. CHOCOLA, IN-2 (H)

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 54 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mike Rogers for Congress

Mailing Address P.O. Box 1113

City: Anniston | State: AL | Zip Code: 36202-

Purpose of Disbursement: CONTR. TO REP. ROGERS, AL-3 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1533
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. ROGERS, AL-3 (H)

B. Full Name (Last, First, Middle Initial)
The Judd Gregg Committee

Mailing Address P.O. Box 1612

City: Concord | State: NH | Zip Code: 03302-

Purpose of Disbursement: CONTR. TO SEN. GREGG, NH (S)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1502
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 2000.00

CONTR. TO SEN. GREGG, NH (S)

C. Full Name (Last, First, Middle Initial)
Friends of Dennis Cardoza

Mailing Address 499 S. Capitol Street, SW
Suite 103

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: CONTR. TO REP. CARDOZA, CA-18 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1539
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. CARDOZA, CA-18 (H)

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 55 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Wyden for Senate

Mailing Address P.O. Box 3498

City: Portland | State: OR | Zip Code: 97208-

Purpose of Disbursement: CONTR. TO SEN. WYDEN, OR (S)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
Primary X General
Other (specify)

Transaction ID: D7132D041E1514
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO SEN. WYDEN, OR (S)

B. Full Name (Last, First, Middle Initial)
Renzi for Congress

Mailing Address P.O. Box 2776

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. RENZI, AZ-1 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
X Primary General
Other (specify)

Transaction ID: D7132D041E1501
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. RENZI, AZ-1 (H)

C. Full Name (Last, First, Middle Initial)
The Mike R Fund

Mailing Address P.O. Box 65796

City: Washington | State: DC | Zip Code: 20035-

Purpose of Disbursement: LEADERSHIP PAC CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: 2004
X Primary General
Other (specify)

Transaction ID: D7132D041E1543
Date of Disbursement: 06 / 23 / 2004

Amount of Each Disbursement this Period: 2500.00

LEADERSHIP PAC CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 56 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address P.O. Box 2776

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. SHIMKUS, IL-19 (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D7132D041E1506
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. SHIMKUS, IL-19 (H)

B. Full Name (Last, First, Middle Initial)
DeMint for Senate

Mailing Address 900 Second Street Suite 114

City: Washington | State: DC | Zip Code: 20002-

Purpose of Disbursement: CONTR. TO REP. DEMINT ,SC (S)

Candidate Name

Category/ Type

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

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

Transaction ID: D7132D041E1461
Date of Disbursement: 06 / 09 / 2004

Amount of Each Disbursement this Period: 5000.00

CONTR. TO REP. DEMINT ,SC (S)

C. Full Name (Last, First, Middle Initial)
Jo Bonner for Congress Committee

Mailing Address P.O. Box 851232

City: Mobile | State: AL | Zip Code: 36685-

Purpose of Disbursement: CONTR. TO REP. BONNER, AL-1 (H)

Candidate Name

Category/ Type

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

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

Transaction ID: D71320041E1529
Date of Disbursement: 06 / 22 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. BONNER, AL-1 (H)

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 57 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
John Spratt for Congress

Mailing Address P.O. Box 636

City: Annandale | State: VA | Zip Code: 22003-

Purpose of Disbursement: CONTR. TO REP. SPRATT. SC-5 (H)

Candidate Name

Category/ Type

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

Disbursement For: 2004 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E149B
Date of Disbursement: 06 / 15 / 2004
Amount of Each Disbursement this Period: 1000.00
CONTR. TO REP. SPRATT, SC-5 (H)

B. Full Name (Last, First, Middle Initial)
Leg Pac

Mailing Address 38 Ivy Street, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: LEADERSHIP PAC CONTRIBUTION

Candidate Name

Category/ Type

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

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D7132D041E151B
Date of Disbursement: 06 / 15 / 2004
Amount of Each Disbursement this Period: 1000.00
LEADERSHIP PAC CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Jo Ann Davis for Congress

Mailing Address P.O. Box 1834

City: Yorktown | State: VA | Zip Code: 23692-

Purpose of Disbursement: CONTR. TO REP. DAVIS. VA-1 (H)

Candidate Name

Category/ Type

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

Disbursement For: 2004 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E152B
Date of Disbursement: 06 / 22 / 2004
Amount of Each Disbursement this Period: 1000.00
CONTR. TO REP. DAVIS, VA-1 (H)

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE 58 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Eric Pac

Mailing Address 4914 Fitzhugh Avenue
Suite 20D

City: Richmond | State: VA | Zip Code: 23230-

Purpose of Disbursement: LEADERSHIP PAC CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | District:

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

Transaction ID: D7132D041E1517
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

LEADERSHIP PAC CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Road to Victory PAC

Mailing Address c/o Williams & Jensen
1155 21st Street, NW

City: Washington | State: DC | Zip Code: 20036-

Purpose of Disbursement: LEADERSHIP PAC CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | District:

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

Transaction ID: D7132D041E1464
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

LEADERSHIP PAC CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Friends of Lane Evans

Mailing Address 499 S. Capitol Street, SW
Suite 114

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: CONTR. TO REP. EVANS, IL-17 (H)

Candidate Name

Category/ Type

Office Sought: House ☐ Senate ☐ President ☐ | District:

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

Transaction ID: D7132D041E1493
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. EVANS, IL-17 (H)

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mike Turner for Congress

Mailing Address P.O. Box 2776

City: Arlington | State: VA | Zip Code: 22202-

Purpose of Disbursement: CONTR. TO REP. TURNER, OH-3 (H)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E1495
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO REP. TURNER, OH-3 (H)

B. Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 First Street, SE

City: Washington | State: DC | Zip Code: 20003-

Purpose of Disbursement: LUNCH FOR REP PITTS EVENT PA-16 (H)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D7132D041E1497
Date of Disbursement: 06 / 17 / 2004

Amount of Each Disbursement this Period: 574.80

IN KIND: LUNCH FOR REP PITTS EVENT PA-16 (H)

C. Full Name (Last, First, Middle Initial)
Friends of Craig Thomas

Mailing Address 408 Virginia Avenue

City: Alexandria | State: VA | Zip Code: 22302-

Purpose of Disbursement: CONTR. TO SEN. THOMAS, WY (S)

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D71320041E1505
Date of Disbursement: 06 / 15 / 2004

Amount of Each Disbursement this Period: 1000.00

CONTR. TO SEN. THOMAS, WY (S)

SUBTOTAL of Disbursements This Page (optional) ▶ **2574.80**

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

PAGE 60 / 61

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Walter Jones for Congress Cte.

Mailing Address P.O. Box 99667

City Raleigh | State NC | Zip Code 27624-

Purpose of Disbursement
CONTR. TO REP. JONES, NC-3 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E1512
Date of Disbursement 06 / 15 / 2004

Amount of Each Disbursement this Period
80.00

CONTR. TO REP. JONES, NC-3 (H)

B. Full Name (Last, First, Middle Initial)
Boustany for Congress

Mailing Address P.O. Box 80126

City Lafayette | State LA | Zip Code 70508-

Purpose of Disbursement
CONTR. TO CAND. BOUSTANY, LA-7 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: D7132D041E152D
Date of Disbursement 06 / 22 / 2004

Amount of Each Disbursement this Period
2500.00

CONTR. TO CAND. BOUSTANY, LA-7 (H)

C. Full Name (Last, First, Middle Initial)
Lewis for Congress Committee

Mailing Address 4451 Brookfield Corp. Drive
Suite 200

City Chantilly | State VA | Zip Code 20151-

Purpose of Disbursement
CONTR. TO REP. LEWIS, CA-41 (H)

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

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

Transaction ID: 071320041E1524
Date of Disbursement 06 / 22 / 2004

Amount of Each Disbursement this Period
1000.00

CONTR. TO REP. LEWIS, CA-41 (H)

SUBTOTAL of Disbursements This Page (optional) ▶ **3580.00**

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	

NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sam Pac

Mailing Address P.O. Box 660096

City: Plano | State: TX | Zip Code: 75086-

Purpose of Disbursement
LEADERSHIP PAC CONTRIBUTION

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District

Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify)

Transaction ID: D7132D041E1534
Date of Disbursement
06 / 22 / 2004

Amount of Each Disbursement this Period
2000.00

LEADERSHIP PAC CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	89654.80