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FEC  
FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **National Renal Administrators Association PAC**  
USE FEC MAILING LABEL OR TYPE OR PRINT  Example: If typing, type over the lines. **12PB4M5**

ADDRESS (number and street) **11250 Roger Bacon Drive Ste 8**

Check if different than previously reported. (ACC)

**Reston**

**VA 20190 5202**

2. FEC IDENTIFICATION NUMBER  CITY  STATE  ZIP CODE

**C00255091**

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

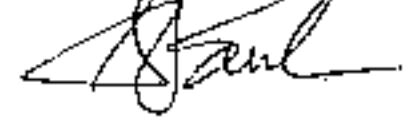
4. TYPE OF REPORT (Choose One)

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

5. Covering Period **07 01 2001** through **12 31 2001**

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

Type or Print Name of Treasurer **James Becker**

Signature of Treasurer 

Date **1/10/02**

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g

Office Use Only							
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FEC FORM 3X  
(Revised 10/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

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Report Covering the Period: From: **07 01 2001** To: **12 31 2001**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2001</b>		776842
(b) Cash on Hand at Beginning of Reporting Period .....	594214	
(c) Total Receipts (from Line 19) .....	503531	1251794
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1097745	2028636
7. Total Disbursements (from Line 30) .....	733863	1664754
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	363882	363882
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) .....		

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 202-684-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Report Covering the Period:

From:

07 01 2001

To:

12 31 2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	307500	
(ii) Unitemized .....	195000	
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	502500	1246500
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	502500	1246500
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1031	5294
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	503531	1251794
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	503531	1251794

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	450000	1313208
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	283863	351546
29. Other Disbursements .....		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....	733863	1664754
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) .....	733863	1664754

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans) (from Line 11(d), page 3) .....
33. Total Contribution Refunds (from Line 28(c)) .....
34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....
36. Offsets to Operating Expenditures (from Line 15, page 3) .....
37. Net Operating Expenditures (subtract Line 36 from Line 35) .....

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

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

FOR LINE NUMBER:		PAGE	OF
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 contributors from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. <u>Olazer Joe</u>		Date of Receipt <u>06 01 2001</u>
Mailing Address <u>1620 Waukegan Rd</u>		Amount of Each Receipt this Period <u>37500</u>
City <u>Morgan Park</u>	State <u>IL</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. <u>Clark Shelley W.</u>		Date of Receipt <u>06 01 2001</u>
Mailing Address <u>1326 7th St. NE</u>		Amount of Each Receipt this Period <u>25000</u>
City <u>Roanoke</u>	State <u>VA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. <u>Duhamel Bill</u>		Date of Receipt <u>06 01 2001</u>
Mailing Address <u>One Maritime Plaza #1325</u>		Amount of Each Receipt this Period <u>100000</u>
City <u>San Francisco, CA</u>	State <u>CA</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional) .....

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: (check only one)		PAGE	OF
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) Kemp Sandra S

Mailing Address P.O. Box 7710

City Tifton State GA Zip Code 31793

FEC ID number of contributing federal political committee. C

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: Primary  General  Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt 06 01 2001

Amount of Each Receipt this Period 100000

B. Full Name (Last, First, Middle Initial) Messana Anthony

Mailing Address 14-6 Valley Road

City Drexel Hill State PA Zip Code 19026

FEC ID number of contributing federal political committee. C

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: Primary  General  Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt 06 01 2001

Amount of Each Receipt this Period 20000

C. Full Name (Last, First, Middle Initial) Towles, Anthony

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee. C

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: Primary  General  Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt 06 01 2001

Amount of Each Receipt this Period 25000

SUBTOTAL of Receipts This Page (optional) \_\_\_\_\_ ▶

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

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. <u>Dave Camp for Congress</u>		Date of Disbursement <u>09 16 2001</u>
Mailing Address <u>P.O. Box 423</u>		Amount of Each Disbursement This Period <u>50000</u>
City <u>Midland</u>	State <u>MI</u>	
Zip Code <u>48640</u>		
Purpose of Disbursement		
Candidate Name <u>Dave Camp</u>		Category/Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. <u>McCreey for Congress</u>		Date of Disbursement <u>09 06 2001</u>
Mailing Address <u>P.O. Box 4650</u>		Amount of Each Disbursement This Period <u>100000</u>
City <u>Shreveport</u>	State <u>LA</u>	
Zip Code <u>7134-0650</u>		
Purpose of Disbursement		
Candidate Name <u>McCreey</u>		Category/Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. <u>LEWIS John for Congress Comm</u>		Date of Disbursement <u>09 06 2001</u>
Mailing Address <u>219 3rd St, S.E</u>		Amount of Each Disbursement This Period <u>100000</u>
City <u>Washington</u>	State <u>DC</u>	
Zip Code <u>20003</u>		
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	

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

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

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NAME OF COMMITTEE (In Full) \_\_\_\_\_

Full Name (Last, First, Middle Initial) A. Friend of Jerry Kleczka		Date of Disbursement 09 06 2001
Mailing Address 4200 Christine Place		Amount of Each Disbursement this Period 100000
City Alexandria	State VA	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Bill Campaign Committee		Date of Disbursement 10 17 2001
Mailing Address PO. Box 395		Amount of Each Disbursement this Period 100000
City Bakersfield	State CA	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Friends of Blanche Lincoln		Date of Disbursement 10 17 2001
Mailing Address 227 Massachusetts Ave NE		Amount of Each Disbursement this Period 100000
City Washington	State DC	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_ ▶

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)					PAGE	OF
<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	
<input type="checkbox"/>	26	<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	
				<input type="checkbox"/>	28c	<input type="checkbox"/>	29	

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NAME OF COMMITTEE (in Full)

Full Name (Last, First, Middle Initial) A. Stone Creek Golf Club		Date of Disbursement 07 03 2001
Mailing Address 4435 East Paradise Village Parkway South		Amount of Each Disbursement this Period 218392
City Phoenix	State AZ	
Zip Code 85032		
Purpose of Disbursement Golf Package		
Candidate Name		Category/Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Dialysis Center of Lincoln		Date of Disbursement 11 19 2001
Mailing Address 710 D. Street		Amount of Each Disbursement this Period 7803
City Lincoln	State NE	
Zip Code 68510		
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. Federal Express		Date of Disbursement 11 19 2001
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 57668
City Memphis	State TN	
Zip Code 38101-1140		
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District:	

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

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

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-11-08</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>ser</i> PREPARER	<i>1-11-08</i> DATE PREPARED