

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM

2002 JUL 16 A D 3h

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines. 12FB4M5

American College of Cardiology Political Action Committee

ADDRESS (number and street) 4111 Old Georgetown Road

Check if different than previously reported. (ACC) Bethesda MD 20814-1169

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

C00375360

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 04 / 01 / 2002 through 06 / 30 / 2002

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 Cathleen C. Gates

Signature of Treasurer Cathleen C. Gates Date 07 / 15 / 2002

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**
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

04 **01** **2002**

To:

06 **30** **2002**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 000		22,859.06
(b) Cash on Hand at Beginning of Reporting Period	473,295	
(c) Total Receipts (from Line 1B)	235,250.00	282,579.5
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	282,579.5	282,579.5
7. Total Disbursements (from Line 3D)	539,889	546,594
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22,859.06	22,859.06
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	000	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	000	



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 (Revised 1/01)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

04 01 2002

To:

06 30 2002

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)	227,000.00	
(ii) Unitemized	8,250.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	235,250.00	282,579.50
(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)(i), (b), and (c)) (Carry Totals to Line 32, page 4)	235,250.00	282,579.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	235,250.00	282,579.50
20. Total Federal Receipts (subtract Line 16 from Line 19)	235,250.00	282,579.50

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	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	3988.9	4659.4
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3988.9	4659.4
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	5000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	53988.9	54659.4
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	53988.9	54659.4

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	235250.0	282579.5
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	235250.0	282579.5
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3988.9	4659.4
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)	3988.9	4659.4

**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 5 OF 18				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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 contributions from such committee.

NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)
Alexander, Jay, H., M.D.

Mailing Address
2256 Carlyle Court

City
Buffalo Grove

State
IL

Zip Code
60089

FEC ID number of contributing federal political committee.
C

Name of Employer
Unaffiliated

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 / 01 / 2002

Amount of Each Receipt this Period
1,000.00

B. Full Name (Last, First, Middle Initial)
Cohn, Peter, F., M.D.

Mailing Address
27 Bouton Road

City
Huntington

State
NY

Zip Code
11743-1046

FEC ID number of contributing federal political committee.
C

Name of Employer
SUNY Health Science Center

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 / 01 / 2002

Amount of Each Receipt this Period
1,000.00

C. Full Name (Last, First, Middle Initial)
Fye, W, Bruce, M.D.

Mailing Address
1533 Seasons Lane, S.W.

City
Rochester

State
MN

Zip Code
55902

FEC ID number of contributing federal political committee.
C

Name of Employer
MAYO Clinic

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 / 01 / 2002

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional) ▶

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

3,000.00

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

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

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

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

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NAME OF COMMITTEE (in Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gillam, Linda D., M.D.

Mailing Address

65 Old Farm Road

City

Hamden

State

CT

Zip Code

06517-1615

FEC ID number of contributing federal political committee.

C

Name of Employer

Hartford Hospital

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

04 / 01 / 2002

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Greenan, Barbara L.

Mailing Address

9418 Balfour Drive

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Director, Legislative Affairs

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2,000.00

Date of Receipt

04 / 01 / 2002

Amount of Each Receipt this Period

2,000.00

Full Name (Last, First, Middle Initial)

C. McEntee, Christine, W.

Mailing Address

3006 North Roberts Lane

City

Arlington

State

VA

Zip Code

22207-5338

FEC ID number of contributing federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

04 / 01 / 2002

Amount of Each Receipt this Period

1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2,200.00

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

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

FOR LINE NUMBER: PAGE 7 OF 18
(check only one)

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

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NAME OF COMMITTEE (in Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)
MIRD, Michael, J., M.D.

Mailing Address
2005 Prestwick Lane

City: Fort Wayne State: IN Zip Code: 46814-9317

FEC ID number of contributing federal political committee: C

Name of Employer: Fort Wayne Cardiology Occupation: Cardiologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 1,000.00

Date of Receipt: 04, 01, 2002

Amount of Each Receipt this Period: 1,000.00

B. Full Name (Last, First, Middle Initial)
Riley, Stancel, M., Jr., M.D.

Mailing Address
420 Randolph Avenue

City: Huntsville State: AL Zip Code: 35801-4120

FEC ID number of contributing federal political committee: C

Name of Employer: Huntsville Cardiothoracic Surgeons Occupation: Cardiologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 1,000.00

Date of Receipt: 04, 01, 2002

Amount of Each Receipt this Period: 1,000.00

C. Full Name (Last, First, Middle Initial)
Rogers, George, P., M.D.

Mailing Address
516 Sundown Parkway

City: Austin State: TX Zip Code: 78746

FEC ID number of contributing federal political committee: C

Name of Employer: Austin Heart, P.A. Occupation: Cardiologist

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date: 1,000.00

Date of Receipt: 04, 01, 2002

Amount of Each Receipt this Period: 1,000.00

SUBTOTAL of Receipts This Page (optional): 3,000.00

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: (check only one)		PAGE 2 OF 18	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)
Seals, A. A., M.D.

Mailing Address
3948 South Third Street, Suite 321

City
Jacksonville Beach

State
FL

Zip Code
32250

FEC ID number of contributing federal political committee.
C

Name of Employer
Unaffiliated

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 01 2002

Amount of Each Receipt this Period
1,000.00

B. Full Name (Last, First, Middle Initial)
Walpole, Howard T., Jr., M.D.

Mailing Address
31 Northumberland

City
Nashville

State
TN

Zip Code
37215

FEC ID number of contributing federal political committee.
C

Name of Employer
Unaffiliated

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 01 2002

Amount of Each Receipt this Period
1,000.00

C. Full Name (Last, First, Middle Initial)
Breaux, Patrick, C., M.D.

Mailing Address
1317 Killdeer

City
New Orleans

State
LA

Zip Code
70122-2233

FEC ID number of contributing federal political committee.
C

Name of Employer
Unaffiliated

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 05 2002

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional) **3,000.00**

TOTAL This Period (last page this line number only) **3,000.00**

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

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

FOR LINE NUMBER: PAGE 9 OF 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hess, Susan, L., M.D.

Mailing Address

4604 Westbury Drive

City

Collegville

State

TX

Zip Code

70034

FEC ID number of contributing federal political committee.

C

Date of Receipt

04 / 05 / 2002

Amount of Each Receipt this Period

250.00

Name of Employer

Unaffiliated

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

B. Kessler, David, J., M.D.

Mailing Address

2105 Schulte Avenue

City

Austin

State

TX

Zip Code

78703

FEC ID number of contributing federal political committee.

C

Date of Receipt

04 / 11 / 2002

Amount of Each Receipt this Period

250.00

Name of Employer

Austin Heart

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

C. Demars, Henry, M.D.

Mailing Address

3040 N.W. 153rd Street

City

Beaverton

State

OR

Zip Code

97006

FEC ID number of contributing federal political committee.

C

Date of Receipt

04 / 19 / 2002

Amount of Each Receipt this Period

250.00

Name of Employer

Oregon Health Sciences University

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

750.00

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

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

FOR LINE NUMBER: PAGE 18 OF 18
(check only one)

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

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ferry, Michael, T., M.D.

Mailing Address
3001 Forestwood

City
Arlington

State
TX

Zip Code
76006

FEC ID number of contributing federal political committee.
C

Name of Employer
Heart Place, Arlington

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 19 2002

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Goodin, Robert, R., M.D.

Mailing Address
3012 Lighthouse Road

City
Louisville

State
KY

Zip Code
40222-6139

FEC ID number of contributing federal political committee.
C

Name of Employer
Cardiovascular Associates

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 19 2002

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Lewis, Barry, K., D.O.

Mailing Address
34162 Valley Forge

City
Farmington Hills

State
MI

Zip Code
48331-3206

FEC ID number of contributing federal political committee.
C

Name of Employer
Cardiovascular Clinical Assocs PC

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
04 19 2002

Amount of Each Receipt this Period
100.00

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

TOTAL This Period (last page this line number only) **1500.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Phillips, Matthew, M.D.

Mailing Address

2301 S. Clear Creek Rd., Suite 103

City

Killeen

State

TX

Zip Code

76549

FEC ID number of contributing federal political committee.

C

Name of Employer

Unaffiliated

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 19 2002

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Delacey, William, A., M.D.

Mailing Address

3003 Lord Bradford Court

City

Chesapeake

State

VA

Zip Code

23321

FEC ID number of contributing federal political committee.

C

Name of Employer

Cardiology Associates

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 30 2002

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Spady, Tony, J., M.D.

Mailing Address

4653 S. Bearfield Road

City

Columbia

State

MO

Zip Code

65201-9136

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

04 30 2002

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brown, David, L., M.D.

Mailing Address

300 Parkwood Court

City

Columbia

State

MO

Zip Code

65203

FEC ID number of contributing federal political committee.

C

Name of Employer

Missouri Cardiovascular Specialists

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

7,500.00

Date of Receipt

05 / 17 / 2002

Amount of Each Receipt this Period

7,500.00

Full Name (Last, First, Middle Initial)

B. Dove, James, T., M.D.

Mailing Address

#7 East Shore Lane

City

Springfield

State

IL

Zip Code

62707-8919

FEC ID number of contributing federal political committee.

C

Name of Employer

Heart Cardiovascular Consultants, Ltd.

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

10,000.00

Date of Receipt

06 / 05 / 2002

Amount of Each Receipt this Period

10,000.00

Full Name (Last, First, Middle Initial)

C. Garson, Arthur, Jr., M.D.

Mailing Address

6619 Belmont Street

City

Houston

State

TX

Zip Code

77005-3805

FEC ID number of contributing federal political committee.

C

Name of Employer

UVA School of Medicine

Occupation

Vice President & Dean

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

06 / 05 / 2002

Amount of Each Receipt this Period

5,000.00

SUBTOTAL of Receipts This Page (optional)

22,500.00

TOTAL This Period (last page this line number only)

22,500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 15
(check only one)

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

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NAME OF COMMITTEE (in Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)
A. Kravitz, Fred, M., M.D.

Mailing Address
607 Rosewood Drive

City
Florence

State
SC

Zip Code
29501

FEC ID number of contributing federal political committee.
C

Name of Employer
Peo Dec Cardiology Associates

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 05 2002

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Lal, Wyman, W., M.D.

Mailing Address
8 Briar Close Road

City
Larchmont

State
NY

Zip Code
10538-1009

FEC ID number of contributing federal political committee.
C

Name of Employer
Mt. Sinai Medical Center

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 05 2002

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Wann, Samuel, M.D.

Mailing Address
4776 N. Cumberland Boulevard

City
Whitefish Bay

State
WI

Zip Code
53211-1147

FEC ID number of contributing federal political committee.
C

Name of Employer
WE Heart & Vascular Clinic, S.E.

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 05 2002

Amount of Each Receipt this Period
500.00

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

TOTAL This Period (last page this line number only) ▶ **1000.00**

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

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

FOR LINE NUMBER: PAGE 14 OF 18

(check only one)

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

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NAME OF COMMITTEE (in Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wolk, Michael, J., M.D.

Mailing Address

87b Park Avenue

City
New York

State

NY

Zip Code

10021-1832

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 05 / 2002

Amount of Each Receipt this Period

250.00

Name of Employer

Occupation

Weill Medical College of Cornell Univ.

Clinical Professor of Medicine

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

B. Boian, Michael, J., M.D.

Mailing Address

6 Cambridge Drive

City
Tupelo

State

MS

Zip Code

38801-6112

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 10 / 2002

Amount of Each Receipt this Period

1000.00

Name of Employer

Occupation

Cardiovascular Assoc. of N. Mississippi

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Full Name (Last, First, Middle Initial)

C. Cowan, Barry, J., M.D.

Mailing Address

909 East Fir Avenue

City
Lompoc

State

CA

Zip Code

93436

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 10 / 2002

Amount of Each Receipt this Period

250.00

Name of Employer

Occupation

Unaffiliated

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Murphy, William, R.C., M.D.

Mailing Address

67 Mission Road

City

Wichita

State

KS

Zip Code

67207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unaffiliated

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

06 10 2002

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Peterson, Paul, A., M.D.

Mailing Address

2961 Drake Drive

City

Anchorage

State

AK

Zip Code

99508-4481

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska Heart Institute

Occupation

Cardiologist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

06 10 2002

Amount of Each Receipt this Period

5,000.00

Full Name (Last, First, Middle Initial)

C. Fraker, Theodore, D., Jr., M.D.

Mailing Address

4241 Mockingbird Lane

City

Toledo

State

OH

Zip Code

43623-3270

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical College of Ohio

Occupation

Associate Dean for Clinical Affairs

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2,500.00

Date of Receipt

06 12 2002

Amount of Each Receipt this Period

2,500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,750.00

1,750.00

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

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

FOR LINE NUMBER: PAGE 16 OF 18
(check only one)

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

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NAME OF COMMITTEE (in Full)
American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)
Teirstein, Paul, S., M.D.

Mailing Address
1515 Coast Walk

City
La Jolla

State
CA

Zip Code
92037

FEC ID number of contributing federal political committee.
C

Name of Employer
 Scripps Clinic & Research Foundation

Occupation
Director / Interventional Cardiology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 12 / 2002

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Murray, John, A., M.D.

Mailing Address
12750 39th Avenue, NE

City
Seattle

State
WA

Zip Code
98125-4612

FEC ID number of contributing federal political committee.
C

Name of Employer
Unaffiliated

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 14 / 2002

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Storv, James, R., M.D.

Mailing Address
1020 Glendalyn Circle

City
Spartanburg

State
SC

Zip Code
29302

FEC ID number of contributing federal political committee.
C

Name of Employer
Spartanburg Regional Medical Center

Occupation
Director Catheterization Lab

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 26 / 2002

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **1,250.00**

TOTAL This Period (last page this line number only) **2,270.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 17 OF 18	
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 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)
American College of Cardiology Political Action Committee

A. Re-elect Nancy Johnson to Congress Committee

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **05/29/2002**

Mailing Address **P.O. Box 1986**

City **New Britain** State **CT** Zip Code **06050**

Purpose of Disbursement **Political Contribution** Category/Type **011**

Candidate Name **Nancy L. Johnson**

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

State: **CT** District: **5**

Amount of Each Disbursement this Period **500.00**

B. John D. Dingell for Congress

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06/21/2002**

Mailing Address **P.O. Box 75214**

City **Washington** State **DC** Zip Code **20013**

Purpose of Disbursement **Political Contribution** Category/Type **011**

Candidate Name **John D. Dingell**

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

State: **MI** District: **16**

Amount of Each Disbursement this Period **1000.00**

C. Friends of Sherrod Brown

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06/27/2002**

Mailing Address **P.O. Box 2884**

City **Washington** State **DC** Zip Code **20013**

Purpose of Disbursement **Political Contribution** Category/Type **011**

Candidate Name **Sherrod Brown**

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

State: **OH** District: **13**

Amount of Each Disbursement this Period **1000.00**

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

TOTAL This Period (last page this line number only) **2500.00**

**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)

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

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NAME OF COMMITTEE (in Full)
American College of Cardiology Political Action Committee

A Nutting for Congress

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06 10 2002**

Mailing Address **62 Campbell Road**

City **Leeds** State **ME** Zip Code **04263**

Purpose of Disbursement **Political Contribution** Amount of Each Disbursement this Period **500.00**

Candidate Name **John M. Nutting** Category/Type **D.I.I.**

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

State: **ME** District: **2**

B. Friends of Dave Weldon

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06 26 2002**

Mailing Address **P.O. Box 16021**

City **Alexandria** State **VA** Zip Code **22302**

Purpose of Disbursement **Political Contribution** Amount of Each Disbursement this Period **1000.00**

Candidate Name **Dave Weldon** Category/Type **D.I.I.**

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

State: **FL** District: **15**

C. Re-elect Nancy Johnson to Congress Committee

Full Name (Last, First, Middle Initial) _____ Date of Disbursement **06 28 2002**

Mailing Address **P.O. Box 1986**

City **New Britain** State **CT** Zip Code **06050**

Purpose of Disbursement **Political Contribution** Amount of Each Disbursement this Period **1000.00**

Candidate Name **Nancy L. Johnson** Category/Type **D.I.I.**

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

State: **CT** District: **5**

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

TOTAL This Period (last page this line number only) **5000.00**

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>7-16-02</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>Chm D</i> PREPARER	<i>7-16-02</i> DATE PREPARED