

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

ADDRESS (number and street)

8201 Greensboro Drive

Suite 300

Check if different than previously reported. (ACC)

McLean

VA

22102

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00168070

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X 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)

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

07

01

2004

through

09

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

Mr. Tristan North

Signature of Treasurer

Electronically Filed by Mr. Tristan North

Date

10

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)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^M07 ^D01 ^Y2004 To: ^M09 ^D30 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		41844.03
(b) Cash on Hand at Beginning of Reporting Period	23000.55	
(c) Total Receipts (from Line 19)	7200.00	12700.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30200.55	54544.03
<hr/>		
7. Total Disbursements (from Line 31)	12509.28	36852.76
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17691.27	17691.27
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Report Covering the Period: From: ^M07 ^D01 ^Y2004 To: ^M09 ^D30 ^Y2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4400.00	
(ii) Unitemized	2800.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	7200.00	12700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7200.00	12700.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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))	7200.00	12700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7200.00	12700.00

DETAILED SUMMARY PAGE

of Disbursements

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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.....	9.28	152.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9.28	152.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	35500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1200.00
(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	1200.00
29. Other Disbursements.....	0.00	0.00
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 ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12509.28	36852.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	12509.28	36852.76

DETAILED SUMMARY PAGE
of Disbursements

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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)	7200.00	12700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	1200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7200.00	11500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9.28	152.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9.28	152.76

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

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

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Rod Carroll		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 2881 S. Pine Island Road		Transaction ID: SA11A1.5141
City Beaumont	State TX	Zip Code 77713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Stat Care EMS	Occupation President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. James Finger		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 18 Central Avenue		Transaction ID: SA11A1.5147
City Rutland	State VT	Zip Code 05707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Regional Ambulance Service, Inc.	Occupation Administration	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Michael Hall		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 2731 28th Avenue, S		Transaction ID: SA11A1.5151
City Fargo	State ND	Zip Code 58103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer FM Ambulance	Occupation Executive Director	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

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

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. III David B. Hill		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 395 West Lake Street		Transaction ID: SA11A1.5152
City Elmhurst	State IL	Zip Code 60126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Owner/Operator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. James S. Johnson		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 1801 Mockingbird Lane		Transaction ID: SA11A1.5159
City Enid	State OK	Zip Code 73709
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Life EMS	Occupation President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Kurt M. Kumpferman		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 2120 E. Golf Avenue		Transaction ID: SA11A1.5183
City Tempe	State AZ	Zip Code 85282
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Rural/Metro	Occupation Group President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	1400.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 14

(check only one)

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Brian Lovellette		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 701 Britten Avenue		Transaction ID: SA11A1.5164
City Lansing	State MI	Zip Code 48810-1321
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Association Services of Michigan	Occupation President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. James McParton		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 793 State Street		Transaction ID: SA11A1.5166
City Schenectady	State NY	Zip Code 12307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Mohawk Ambulance Service	Occupation Owner/Operator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Mark Meter		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 1275 Cedar Street, NE		Transaction ID: SA11A1.5187
City Grand Rapids	State IL	Zip Code 49503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Life EMS, Inc.	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 14

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

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Louis Meyer		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 10644 N. Oakwilde Avenue		Transaction ID: SA11A1.5168
City Stockton	State CA	Zip Code 95212
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AMR	Occupation CEO - Regional	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Steven G. Murphy		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 6200 South Syracuse Way #200		Transaction ID: SA11A1.5171
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer American Medical Response	Occupation Exec. Vice Pres. (Gov. & Nat. Serv.)	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. David Nevins		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 333 Diamond Oaks Road		Transaction ID: SA11A1.5172
City Roseville	State CA	Zip Code 95678
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Executive Management Services	Occupation Owner/Operator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 10 / 14

(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 AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Stanley Portman		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 28C Camation Circle		Transaction ID: SA11A1.5173
City Reading	State MA	Zip Code 01867
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Action Ambulance	Occupation President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Carol Schil		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 854D Archipsald Avenue 18D		Transaction ID: SA11A1.5180
City Rancho Cucamonga	State CA	Zip Code 91730
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Priority One Medical	Occupation Executive Vice President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Branda Staffan		Date of Receipt M / D / Y 09 / 08 / 2004
Mailing Address 323B Old Coach Way		Transaction ID: SA11A1.5189
City Reno	State NV	Zip Code 89511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Rural/Metro Corporation	Occupation Owner/Operator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial) A. Larry Wiersch		Date of Receipt M / D / Y Y Y Y 09 / 08 / 2004
Mailing Address 4848 Five Point Road		Transaction ID: SA11A1.5192
City	State	Zip Code
New Tripoli	PA	18066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Cetronia Ambulance	Occupation Administrator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Kurt Williams		Date of Receipt M / D / Y Y Y Y 09 / 08 / 2004
Mailing Address 2122 Willow Street		Transaction ID: SA11A1.5193
City	State	Zip Code
San Diego	CA	92106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer American Medical Response	Occupation Vice President	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Gerald Zapotnik		Date of Receipt M / D / Y Y Y Y 09 / 08 / 2004
Mailing Address 111B Rathfan Circle		Transaction ID: SA11A1.5194
City	State	Zip Code
Saline	MI	48178
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Huron Valley Ambulance	Occupation VP Support Operations	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	4400.00

**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 12 / 14

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. BILL THOMAS CAMPAIGN COMMITTEE

Mailing Address PO BOX 395

City BAKERSFIELD State CA Zip Code 93302

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼
State: CA District: 22

011
Category/
Type

Transaction ID: SB23.5198

Date of Disbursement

08 / 02 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)
B. FRIENDS OF JOHN MCCAIN

Mailing Address 1158 EAST MISSOURI

City PHOENIX State AZ Zip Code 85014

Purpose of Disbursement
Campaign Contribution

Candidate Name
FRIENDS OF JOHN MCCAIN

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼
State: AZ District: 00

011
Category/
Type

Transaction ID: SB23.5208

Date of Disbursement

08 / 22 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. GRASSLEY COMMITTEE

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement
Campaign Contribution

Candidate Name
GRASSLEY COMMITTEE

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼
State: IA District: 00

011
Category/
Type

Transaction ID: SB23.5200

Date of Disbursement

08 / 16 / 2004

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. LATOURETTE FOR CONGRESS COMMITTEE

Mailing Address 320 Kenarden Dr.

City Highland Hts. State OH Zip Code 44143

Purpose of Disbursement Campaign Contribution

Candidate Name LATOURETTE FOR CONGRESS COMMITTEE

Office Sought: House Senate President

Disbursement For: 2004
 Primary General Other (specify) ▼

State: OH District: 14

Transaction ID: SB23.5203
Date of Disbursement
09 / 16 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. MARK KENNEDY FOR CONGRESS

Mailing Address PO Box 49333

City Blaine State MN Zip Code 55440

Purpose of Disbursement Campaign Contribution

Candidate Name MARK KENNEDY FOR CONGRESS

Office Sought: House Senate President

Disbursement For: 2004
 Primary General Other (specify) ▼

State: MN District: D6

Transaction ID: SB23.5199
Date of Disbursement
08 / 01 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
C. MIKE ROSS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 360

City PRESCOTT State AR Zip Code 71857

Purpose of Disbursement Campaign Contribution

Candidate Name MIKE ROSS FOR CONGRESS COMMITTEE

Office Sought: House Senate President

Disbursement For: 2004
 Primary General Other (specify) ▼

State: AR District: 4

Transaction ID: SB23.5207
Date of Disbursement
09 / 22 / 2004

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

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)

PAGE 14 / 14

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

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NAME OF COMMITTEE (In Full)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Full Name (Last, First, Middle Initial)
A. SCHWARZ FOR CONGRESS

Transaction ID: SB23.5205
Date of Disbursement

Mailing Address POST OFFICE BOX 2083

09 / 16 / 2004

City BATTLE CREEK State MI Zip Code 49016

Amount of Each Disbursement this Period

Purpose of Disbursement
Campaign Contribution

011
Category/
Type

1000.00

Candidate Name
SCHWARZ FOR CONGRESS

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: MI District: D7

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

12500.00