

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 PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 88 ROWLAND WAY SUITE 300 Check if different than previously reported. (ACC) NOVATO CA 94945

2. FEC IDENTIFICATION NUMBER C00403998 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2010 through 09 30 2010

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 Jon R Alsterlind Signature of Treasurer Electronically Filed by Jon R Alsterlind Date 10 14 2010

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. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		15558.61
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	27638.61									
(c) Total Receipts (from Line 19)	16180.00	33260.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	43818.61	48818.61								
7. Total Disbursements (from Line 31)	12000.00	17000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31818.61	31818.61								
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**

Write or Type Committee Name

PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

Report Covering the Period: From: To:

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)	16180.00	33170.00
(ii) Unitemized	0.00	90.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16180.00	33260.00
(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)	16180.00	33260.00
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))	16180.00	33260.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16180.00	33260.00

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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	17000.00
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	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. 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))..	12000.00	17000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.00	17000.00

DETAILED SUMMARY PAGE
of Disbursements

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)	16180.00	33260.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16180.00	33260.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 9

(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

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)
PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Jon R Alsterlind		Date of Receipt MM / DD / YYYY 09 / 10 / 2010		
	Mailing Address 88 Rowland Way Suite 300		Transaction ID: SA11AI.4672		
	City Novato	State CA	Zip Code 94945	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Pacific Pulmonary Services	Occupation Controller		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼
2000.00

B.	Full Name (Last, First, Middle Initial) Chin Chao		Date of Receipt MM / DD / YYYY 09 / 08 / 2010		
	Mailing Address 35 Ridge Road		Transaction ID: SA11AI.4670		
	City San Anselmo	State CA	Zip Code 94960	Amount of Each Receipt this Period 3500.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer PPS	Occupation IT Director		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼
4000.00

C.	Full Name (Last, First, Middle Initial) Jim Doty		Date of Receipt MM / DD / YYYY 09 / 02 / 2010		
	Mailing Address 161 Stetson Avenue		Transaction ID: SA11AI.4671		
	City Corte Madera	State CA	Zip Code 94925	Amount of Each Receipt this Period 3000.00	
	FEC ID number of contributing federal political committee. C		Contribution		
	Name of Employer Pacific Pulmonary Services	Occupation VP of Marketing		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼
3000.00

SUBTOTAL of Receipts This Page (optional)	▶	8500.00
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 7 / 9
(check only one)
 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)
PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Pete Escobar

Mailing Address 3407 Burlington Ave

City State Zip Code
Evans CO 80620

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PPS Operations Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 10 / 2010
Transaction ID: SA11AI.4669

Amount of Each Receipt this Period 50.00

Contribution

B. Full Name (Last, First, Middle Initial)
Megan Gallegos

Mailing Address 830 Live Oak Dr. NE

City State Zip Code
Albuquerque NM 87122

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PPS Region Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 08 / 10 / 2010
Transaction ID: SA11AI.4667

Amount of Each Receipt this Period 80.00

Contribution

C. Full Name (Last, First, Middle Initial)
Chris Kane

Mailing Address 40 Geary Avenue

City State Zip Code
Fairfax CA 94930

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Braden Partners, LP VP -Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 04 / 2010
Transaction ID: SA11AI.4666

Amount of Each Receipt this Period 5000.00

Contribution

SUBTOTAL of Receipts This Page (optional) 5130.00

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 / 9
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<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)
PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Reed Levick		Date of Receipt MM / DD / YYYY 08 / 10 / 2010
Mailing Address 1502 NE Parkside Drive		Transaction ID: SA11AI.4668
City Hillsboro	State OR	Zip Code 97124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer PPS	Occupation Region Manager	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Nancy Murr		Date of Receipt MM / DD / YYYY 09 / 03 / 2010
Mailing Address 3715 Treemont Court		Transaction ID: SA11AI.4673
City Colleyville	State TX	Zip Code 76034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer PPS	Occupation VP - Revenue	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	2550.00
TOTAL This Period (last page this line number only)	16180.00

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	<input type="checkbox"/> 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)
PACIFIC PULMONARY SERVICES POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CITIZENS FOR HARKIN

Transaction ID: SB23.4675
Date of Disbursement

Mailing Address P O BOX 811

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	0		2	0	1	0

City State Zip Code
DES MOINES IA 50304

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/ Type

2000.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
ENZI FOR US SENATE

Transaction ID: SB23.4682
Date of Disbursement

Mailing Address PO BOX 2775

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	0

City State Zip Code
CODY WY 82414

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/ Type

5000.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF SCHUMER

Transaction ID: SB23.4680
Date of Disbursement

Mailing Address 509 MADISON AVE SUITE 1902

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	0

City State Zip Code
NEW YORK NY 10022

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/ Type

5000.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

12000.00
