Image#	29991763020

FEC FORM 3X	AN	EPORT(ID DISB Other Than	URSEN	IENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		xample:If typing ver the lines	, type			
					/MITTEE			
ADDRESS (number and	street)	901 RESEARCH	I BOULEVARD	SUITE 350				
Check if differ than previousl reported. (ACC	/ IB	OCKVILLE					20850	
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		5	STATE	ZIPCOD	E 🔺
C00416305	• • • •		3. IS THIS REPOR		NEW (N) OR	X AN (A)	IENDED	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M	orts: Report(Q1) Report(Q2) 5 Report(Q3) 31 Report(YE) lid-Year on-election	(b) Monthly Report Due On: (c) 12-Day PRE -Ele Report 1 (d) 30-Day Post -E Report 1	Election on	3)	12C)	Sep	20 (M9) 20 (M10) 12G) 2G) in the State of	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
(TER)	on Report	перил	Election on	10	04	2008	in the State of	MD
5. Covering Period	10	16 2	008	through	11	24	2008	
I certify that I have exam Type or Print Name of T	-	Dr. Jeremy Roth	of my knowledg	e and belief it is				2000
Signature of Treasurer		-		ubiost the sec		ate 03		2009
NOTE : Submission of f	aise, erroneous	s, or incomplete in	itormation may	subject the pers	ion signing this	s Report to the		_
Use Only							FEC FORM (Rev. 12/2004	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

F	eport Covering the Period: From:	0 16 Y Y W Y 2008	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2008 Y		36708.64
	(b) Cash on Hand at Begining of Reporting Period	39536.67]
	(c) Total Receipts (from Line 19)	3870.00	33660.00
	 (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	43406.67	70368.64
7.	Total Disbursements (from Line 31)	1250.00	28211.97
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42156.67	42156.67
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

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE ^M 1 0 1^D6 м м 1 1 2^D4 Μ D D 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 16550.00 3555.00 (i) Itemized (use Schedule A) 315.00 17110.00 (ii) Unitemized (iii) TOTAL (add 3870.00 33660.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines (d) 11(a)(iii),(b) and (c)) (Carry 3870.00 33660.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 3870.00 33660.00 12, 13, 14, 15, 16, 17, and 18(c))

3870.00

33660.00

Image# 29991763023

DETAILED SUMMARY PAGE

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	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		
22.	(add 21(a)(i), (a)(ii) and (b)) Transfers to Affiliated/Other Party	0.00	0.00
	Committees Contributions to	0.00	0.00
	Federal Candidates/Committees	0.00	0.00
4.	Independent Expenditure	0.00	0.00
25.	(use Schedule E) 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
-	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(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	1250.00	28211.97
	L		
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,	1050.00	00044.07
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1250.00	28211.97
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1250.00	28211.97

Image# 29991763024

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 5
	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)	3870.00	33660.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	3870.00	33660.00
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

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	itatements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 6 / 29 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
Α.	Full Name (Last, First, Middle Initial) Dr. Marc Beck Mailing Address 16 Norris Run Court	Date of Receipt		
		Ctoto	Zin Codo	10 24 2008
	City Reisterstown	State MD	Zip Code 21136	Transaction ID: SA11AI.4571 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 400.00]
- B.	Full Name (Last, First, Middle Initial) Dr. John Bunker Mailing Address 15229 National Pike			Date of Receipt
				10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4531
	Hagerstown	MD	21740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify)		400.00]
- C.	Full Name (Last, First, Middle Initial) Dr. Donald Charney	•		Date of Receipt
	Mailing Address 3707 Meadowhill Court	t		10 ^{D D} / Y Y Y 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4572
	Phoenix	MD	21131	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia	n	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 400.00]
ſ	SUBTOTAL of Receipts This Page (optional)		·····	150.00
ŀ	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 / 29 (check only one) X 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions contributions automatic contributions
	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSO		
A.	Full Name (Last, First, Middle Initial) Dr. Stayam Chary Mailing Address 9 Alterwood Lane	Date of Receipt	
			10 24 2008
	City	State Zip Code	Transaction ID: SA11AI.4573
	Owings Mill	MD 21117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	400.00	
- B.	Full Name (Last, First, Middle Initial) Dr. Thomas Chau		Date of Receipt
	Mailing Address 7204 Loch Edin Court		10 ^{//} 24 [/] 2008
	City	State Zip Code	Transaction ID: SA11AI.4549
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date	
	Primary General Other (specify) ▼	400.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Dwayn Chen		Date of Receipt
	Mailing Address 11415 Commonwealth D #204	rive	10 ^{//} 24 [/] 2008
	City	State Zip Code	Transaction ID: SA11AI.4552
	Rockville	MD 20852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date	
	Primary General Other (specify) ▼	400.00	
	SUBTOTAL of Receipts This Page (optional)	••••••	150.00
ŀ	TOTAL This Period (last page this line number onl	y)	

				f	
S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 8 / 29
			for each catego		(check only one)
1			Detailed Summ		X 11a 11b 11c 12
_			L		13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or use dress of any politic	ed by any person al committee to s	tor the purpose of soliciting contributions olicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)				
	angle FIRST COLONIES ANESTHESIA ASSO	OCIATES L	LC POLITICAL	ACTION CON	<i>I</i> MITTEE
× 4.	Full Name (Last, First, Middle Initial) Dr. Edward Chen				Date of Receipt
	Mailing Address 10209 Fleming Avenue				M M / D D / Y Y Y Y Y 10 24 2008
	City	State	Zip Code		Transaction ID: SA11AI.4550
	Bethesda	MD	20814		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer	Occupatio	n		payroll deduction
	Name of Employer First Colonies Anesthesia	Physician			
	Receipt For:		e Year-to-Date 🔻		1
	Primary General	~yyreya€			
	Other (specify) ▼	0 0	0 0 0 0	400.00	
-	Full Name (Last, First, Middle Initial) Dr. Jen Chen				Date of Receipt
	Mailing Address 1104 Mill Ridge Road				$\begin{array}{c c} M & M \\ \hline 1 & 2 \\ \end{array} \begin{pmatrix} D & D \\ 2 \\ 4 \\ \end{array} \begin{pmatrix} Y & Y \\ 2 \\ 0 \\ 0 \\ 8 \\ \end{array}$
	City	State	Zip Code		Transaction ID: SA11AI.4551
	McLean	VA	22102		Amount of Each Receipt this Period
	FEC ID number of contributing			-	
	federal political committee.	C			50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician			payroll deduction
	Receipt For:		e Year-to-Date 🔻]
	Primary General Other (specify) ▼			400.00	
_	Full Name (Last, First, Middle Initial) Dr. William Chester				Date of Receipt
					· · · · · · · · · · · · · · · · · · ·
	Mailing Address 5801 Nicholon Lane #1915				10 ¹ 24 ¹ 2008
	City	State	Zip Code		Transaction ID: SA11AI.4553
	North Bethesda	MD	20852		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer First Colonies Anesthesia	Occupation			payroll deduction
		Physicia			-
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) ▼	0 0		400.00	
Γ					150.00
	SUBTOTAL of Receipts This Page (optional)			····· •	130.00
Γ					
	TOTAL This Period (last page this line number o	nly)		►	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and Sta or for commercial purposes, other than using the n	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 29 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions solicit contributions
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSO		
۷ A.	Full Name (Last, First, Middle Initial) Dr. Lincoln Coore Mailing Address 4846 Lee Hollow Place	Date of Receipt	
			10 24 2008
	City	State Zip Code	Transaction ID: SA11AI.4574
	Ellicott City	MD 21043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer First Colonies Anesthsia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	600.00	
- B.	Full Name (Last, First, Middle Initial) Dr. Melvin Coursey		Date of Receipt
	Mailing Address 18720 Shremor Drive		10 ^{//} 24 ^{//} 2008
	City	State Zip Code	Transaction ID: SA11AI.4554
	Derwood	MD 20855	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date	
	Primary General Other (specify) ▼	400.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Lauren Deloach		Date of Receipt
	Mailing Address 15114 Pepperridge Drive	9	10 ^{//} 24 [/] 2008
	City	State Zip Code	Transaction ID: SA11AI.4524
	Bowie	MD 20721	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduciton
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	400.00	
ſ	SUBTOTAL of Receipts This Page (optional)	·····	175.00
F	TOTAL This Period (last page this line number or	nly)	

		Г		FOR LINE NUMBER: PAGE 10/29
:	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
	ITEMIZED RECEIPTS		for each category of the	X 11a $11b$ 11c 12
			Detailed Summary Page	
Γ	Any information copied from such Reports and S	Statements may r	not be sold or used by any perso	on for the purpose of soliciting contributions
	or for commercial purposes, other than using the	e name and addre	ess of any political committee to	solicit contributions from such committee.
	FIRST COLONIES ANESTHESIA AS	SOCIATES LL	C POLITICAL ACTION CC	DMMITTEE
A.	Full Name (Last, First, Middle Initial) Dr. Danielle Dugan	Date of Receipt		
	Mailing Address 104 Ellingwood Lane	10 ^{//} 24 ^{//} 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4533
	Frederick	MD	21702	Amount of Each Receipt this Period
	FEC ID number of contributing			50.00
	federal political committee.	C		
	Name of Employer First Colonies Anesthesia	Occupation		payroll deduction
		Physician		
	Receipt For:	Aggregate Y	lear-to-Date ▼	_
	Other (specify)		340.00	
		0 0 0		1
	Full Name (Last, First, Middle Initial)	•		
В.	Dr. Karen Dugan	Date of Receipt		
	Mailing Address 4107 Vickie Lynn Cou	10 ²⁴ 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4532
	Mt. Airy	MD	21771	Amount of Each Receipt this Period
	FEC ID number of contributing	С		20.00
	federal political committee.			
	Name of Employer First Colonies Anesthsia	Occupation		payroll deduction
		Physician		
	Receipt For: Primary General	Aggregate Y	lear-to-Date ▼	
	Other (specify)		220.00	
_		0 0 0	0 0 0 0 0 0 0 0	1
с.	Full Name (Last, First, Middle Initial) Dr. Todd Epstein			Date of Receipt
	Mailing Address 11305 Struttman Terra	ace		M M / D D / Y Y Y Y
	City	State	Zip Code	10242008 Transaction ID: SA11AI.4585
	North Bethesda	MD	20852	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupation		payroll deduction
	First Colonies Anesthesia	Physician		
	Receipt For:	Aggregate Y	lear-to-Date ▼	_
	Primary General Other (specify) ▼		400.00	1
		0.0		1
ſ	SUBTOTAL of Receipts This Page (optional)			120.00
⊦	CODITION OF THE OF THE OF THE TAGE (OPTIONAL)			
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and State or for commercial purposes, other than using the na	Use separate schedule(s) for each category of the Detailed Summary Page ements may not be sold or used by any perso me and address of any political committee to	FOR LINE NUMBER: PAGE 11 / 29 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee. 10 10 17
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSO		
A .	Full Name (Last, First, Middle Initial) Dr. Philip Ferkler Mailing Address 4107 Vickie Lynn Court	Date of Receipt	
			10 24 2008
	City	State Zip Code	Transaction ID: SA11AI.4534
	<u>Mt. Airy</u>	MD 21771	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date	
	Other (specify)	240.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli		Date of Receipt
	Mailing Address 504 Reserve Champion I		10 ^{//} 24 ^{//} 2008
	City	State Zip Code	Transaction ID: SA11AI.4535
	Rockvillem	MD 20850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	400.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Steven Grube		Date of Receipt
	Mailing Address 13895 Foxtower Road		M M / D D / Y Y Y Y 10 24 2008
	City	State Zip Code	Transaction ID: SA11AI.4536
	Thurmont	MD 21788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	400.00	
	SUBTOTAL of Receipts This Page (optional)	•	130.00
	TOTAL This Period (last page this line number on	y)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 12 / 29 (check only one) X 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements magame and ad	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSO	CIATES L	LC POLITICAL ACTION CO	MMITTEE
A.	Full Name (Last, First, Middle Initial) Dr. Keith Hairston	Date of Receipt		
	Mailing Address 12312 Highstakes Drive	10 ² / 24 ² / 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4575
	Reisterstown	MD	21136	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	 Primary General Other (specify) ▼ 	0 0	400.00	
В.	Full Name (Last, First, Middle Initial) Dr. Jean-Max Hogarth			Date of Receipt
	Mailing Address 1614 Randallwood Court			M M / D D / Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4577
	Jarretsville	MD	21084	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	400.00	
C.	Full Name (Last, First, Middle Initial) Dr. Sung Hong			Date of Receipt
	Mailing Address 8525 Huntspring Drive			10 ^{//} 24 ^{//} 2008
	City	State	Zip Code	Transaction ID: SA11AI.4578
	Lutherville	MD	21093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	 Primary General Other (specify) ▼ 	0 0	400.00	
	SUBTOTAL of Receipts This Page (optional)		•	150.00
	TOTAL This Period (last page this line number on	ly)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 29
	· · ·		for each category of the Detailed Summary Page	(check only one)
	ITEMIZED RECEIPTS			X 11a 11b 11c 12
			Dotanou Communy Page	
	Any information copied from such Reports and Stat	tements ma	y not be sold or used by any perso	n for the purpose of soliciting contributions
	or for commercial purposes, other than using the na	ame and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	FIRST COLONIES ANESTHESIA ASSC	CIATES I	LC POLITICAL ACTION CO	MMITTEE
	Full Name (Last, First, Middle Initial)			
Α.	Dr. Steven Hopper	Date of Receipt		
	Mailing Address 4550 N. Park Avenue	M M / D D / Y Y Y Y		
	#101			10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4586
	Chevy Chase	MD	20815	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		50.00
				nouroll deduction
	Name of Employer First Colonies Anesthesia	Occupatio	n	payroll deduction
	First Colonies Anestnesia	Physicia	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General	00 0		
	Other (specify)		400.00	
	Full Name (Last, First, Middle Initial)			
В.	Dr. Stuart Hough			Date of Receipt
	Mailing Address 9110 Travener Circle			
				10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4555
	Frederick	MD	21704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer First Colonies Anesthesia	Occupatio	n	payroll deduction
	First Colonies Anesthesia	Physicia	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General			
	Other (specify)		600.00	
	Full Name (Last, First, Middle Initial)			1
C.	Dr. David Johnson			Date of Receipt
	Mailing Address 5506 Bootjack Drive			M M / D D / Y Y Y Y
				10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4537
	Frederick	MD	21702	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	• 			payroll deduction
	Name of Employer First Colonies Anesthesia	Occupatio		
		Physicia	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		100.00	
	Other (specify)		400.00	
	SUBTOTAL of Receipts This Page (optional)			175.00
	TOTAL This Period (last page this line number or	nhv)		
	I VIAL THIS FERRUL (IAST PAGE THIS THE HUMDER OF	יי ע יי) איי	·····	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 1	
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.	
	angle FIRST COLONIES ANESTHESIA AS	SOCIATES LLC POLITICAL ACTION C	COMMITTEE	
× ٩.	Full Name (Last, First, Middle Initial) Dr. Christina Johnston	Date of Receipt		
	Mailing Address 3458 Holland Cliffs R	10 ^{M M} / D D / Y Y Y Y 2008		
	City	State Zip Code	Transaction ID: SA11AI.4525	
	Huntingtown	MD 20639	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	50.00	
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction	
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify)	400.00		
 5.	Full Name (Last, First, Middle Initial) Dr. James Kaufman		Date of Receipt	
	Mailing Address 7514 Arrowwood Roa	d	M M / D P Y	
	City	State Zip Code	Transaction ID: SA11AI.4587	
	Bethesda	MD 20817	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		50.00	
	Name of Employer First Colonies Anesthesia	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		
-	Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol	I	Date of Receipt	
•	Mailing Address 6579 Prestwick Drive		10 24 2008	
	City Highland	State Zip Code MD 20777	Transaction ID: SA11AI.4538 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		50.00	
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		
Γ		I	150.00	

			FOR LINE NUMBER: PAGE 15/29
	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	(check only one)
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
_		Detailed Gummary Page	13 14 15 16 17
	Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may not be sold or used by any person ne and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
1	NAME OF COMMITTEE (In Full)		
	FIRST COLONIES ANESTHESIA ASSOC	CIATES LLC POLITICAL ACTION CO	MMITTEE
, А.	Full Name (Last, First, Middle Initial) Dr. Richard Ko		Date of Receipt
	Mailing Address 4101 Hunt Road		10 ^{//} 24 [/] 2008
	City	State Zip Code	Transaction ID: SA11AI.4588
	Fairfax	VA 22032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	First Colonide Anosthosia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General		
	Other (specify)	400.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Harkisan Laheri		Date of Receipt
	Mailing Address 11722 Split Tree Circle		10 ²⁰ /24 ²⁰⁰⁸
	City	State Zip Code	Transaction ID: SA11AI.4556
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	First Colonios Anosthosia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General		
	Other (specify)	400.00	
- С.	Full Name (Last, First, Middle Initial) Dr. Kathleen Leavitt		Date of Receipt
	Mailing Address 3467 North Venice Street		M M / D D / Y Y Y Y 10 24 2008
	City	State Zip Code	Transaction ID: SA11AI.4589
	Arlington	VA 22207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	First Colonios Anosthosia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	400.00	
[SUBTOTAL of Receipts This Page (optional)		150.00
	TOTAL This Period (last page this line number only	/)	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 29 (check only one)
	TEMIZED RECEIPTS		for each category of the	
			Detailed Summary Page	X 11a 11b 11c 12
Г	Any information panied from such Departs and O	totomonto	v not be cold or wood by any set	13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	name and ad	dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	FIRST COLONIES ANESTHESIA ASS			
	FIRST COLONIES ANEST HESIA ASS		LEC FOLITICAL ACTION CC	MMM TEE
	Full Name (Last, First, Middle Initial)			
Α.	Dr. Thomas Malone	Date of Receipt		
	Mailing Address 11667 Fairmont Place	10 ²⁴ 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4539
	ljamsville	MD	21754	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		75.00
	·			payroll deduction
	Name of Employer First Colonies Anesthesia	Occupatio		
		Physicia		_
	Receipt For: Primary General	Aggregate	e Year-to-Date	
	Other (specify)		600.00	
		1 1		1
-	Full Name (Last, First, Middle Initial)			
В.	Dr. Mollyann March			Date of Receipt
	Mailing Address 6504 Greentree Road			M M / D D / Y Y Y Y
		10 24 2008		
	City	Transaction ID: SA11AI.4540		
	<u>Bethesda</u>	MD	20817	Amount of Each Receipt this Period
	FEC ID number of contributing	0		75.00
	federal political committee.	C		73.00
	Name of Employer	Occupatio	n	 payroll deduction
	Name of Employer First Colonies Anesthesia	Physicia		
	Receipt For:	<u>, </u>	e Year-to-Date 🔻	
	Primary General	Ayyreyall		1
	Other (specify)		600.00	
				1
-	Full Name (Last, First, Middle Initial)			
C.	Dr. Stephen Martin			Date of Receipt
	Mailing Address 3336 O Street, NW			10 [/] 24 [/] 2008
	City	State	Zip Code	Transaction ID: SA11AI.4557
	Washington	DC	20007	Amount of Each Receipt this Period
			20007	Amount of Lach Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio		payroll deduction
		Physicia		_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		400.00	1
	Other (specify)	0.0		1
г				
				200.00
	SUBTOTAL of Receipts This Page (optional)		•••••••	-
	TOTAL This Period (last page this line number	oniy)	P	

SCHEDULE A (FEC Form 3)	() Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 29
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
	ASSOCIATES LLC POLITICAL ACTION CO	MMITTEE
		1
Full Name (Last, First, Middle Initial) Dr. Anna Noriega		Date of Receipt
Mailing Address 603 Queen Street		10 24 2008
#4 City	State Zip Code	Transaction ID: SA11AI.4558
Alexandria	VA 22314	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		100.00
Name of Employer First Colonies Anesthesia	Occupation	payroll deduction
	Physician	_
Receipt For:	Aggregate Year-to-Date 🔻	
Other (specify)	800.00	
Full Name (Last, First, Middle Initial)		
Dr. Denis O'Fallon		Date of Receipt
Mailing Address 12123 Merricks Con	urt	10 24 Y Y Y Y 10 24
City	State Zip Code	Transaction ID: SA11AI.4541
Monrovia	MD 21770	Amount of Each Receipt this Period
FEC ID number of contributing	C	50.00
federal political committee.		
Name of Employer First Colonies Anesthesia	Occupation	payroll deduction
	Physician	_
Receipt For: Primary General	Aggregate Year-to-Date	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Dr. Philip Owens		Date of Receipt
Mailing Address 141 Adams Street,	NW	M M / D D / Y Y Y Y
		10 24 2008
City	State Zip Code	Transaction ID: SA11AI.4559
Washington	State Zip Code DC 20001	Amount of Each Receipt this Period
Washington FEC ID number of contributing	·	
Washington FEC ID number of contributing federal political committee.	DC 20001	Amount of Each Receipt this Period 50.00
Washington FEC ID number of contributing	DC 20001 C Occupation	Amount of Each Receipt this Period
Washington FEC ID number of contributing federal political committee.	DC 20001 C Occupation Physician	Amount of Each Receipt this Period 50.00
Washington FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	DC 20001 C Occupation Physician Aggregate Year-to-Date	Amount of Each Receipt this Period 50.00
Washington FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For:	DC 20001 C Occupation Physician	Amount of Each Receipt this Period 50.00
Washington FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	DC 20001 C Occupation Physician Aggregate Year-to-Date	Amount of Each Receipt this Period 50.00
Washington FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	DC 20001 C Occupation Physician Aggregate Year-to-Date 400.00	Amount of Each Receipt this Period 50.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions rule between the purpose of soliciting contributions 11 12
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
A.	Full Name (Last, First, Middle Initial) Dr. Paul Park Mailing Address 821 Oak Knoll Terrace			Date of Receipt
				10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4560
	Rockville	MD	20850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio		payroll deduction
	Receipt For:	Physicia		_
	Primary General	Aggregate	e Year-to-Date	1
	Other (specify)	0 0	400.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Kestutis Pauliukonis			Date of Receipt
	Mailing Address 1813 Solitaire Lane			M M / D D / Y Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4561
	McLean	VA	22101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	400.00]
- C.	Full Name (Last, First, Middle Initial) Dr. Michael Peck			Date of Receipt
	Mailing Address 4 Farm Haven Court			M M / D D / Y Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4590
	Rockville	MD	20852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date 600.00	1
Г	· · · · · · · · · · · · · · · · ·	0 0	0 0 0 0 0 0 0 0	
-	SUBTOTAL of Receipts This Page (optional)		••••••	175.00
	TOTAL This Period (last page this line number	only)		

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	SOCIATES I	LC POLITICAL ACTION CC	DMMITTEE
∠ A.	Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba			Date of Receipt
	Mailing Address 8400 Tysons Trace Co	10 ^M 24 ^Y YYY 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4563
	Vienna	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction
	Receipt For:	1 1 2	e Year-to-Date V	1
	Other (specify)	0 0	400.00]
— В.	Full Name (Last, First, Middle Initial) Dr. Eugen Pirovic	I		Date of Receipt
	Mailing Address 3912 Calverton Drive			M M / D D / Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4591
	Hyattsville	MD	20782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupation Physicia		 payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		400.00]
– C.	Full Name (Last, First, Middle Initial) Dr. Clyde Pray	1		Date of Receipt
-	Mailing Address 908 Oak Knoll Terrace)		M M / D D / Y Y Y Y 10 24 2008
	City Rockville	State MD	Zip Code 20850	Transaction ID: SA11AI.4600
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction
	Receipt For: Primary General Other (specify) ▼	1 I I	e Year-to-Date 400.00]
Γ	SUBTOTAL of Receipts This Page (optional)	I		150.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 29 (check only one) 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions 11 11 12
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	name and ad	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Dr. Kathleen Ranney Mailing Address 1819 N. Greenleese Di	rive		Date of Receipt
	0.1	0	7' . 0	10 24 2008
	City Frederick	State MD	Zip Code 21701	Transaction ID: SA11AI.4543 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physicia Aggregate		payroll deduction
- B.	Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto Mailing Address 6409 Pinehurst Road			Date of Receipt
	City	State	Zip Code	Transaction ID: SA11AI.4582
	Baltimore	MD	21212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonis Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 400.00]
- C.	Full Name (Last, First, Middle Initial) Dr. Timothy Robinson			Date of Receipt
	Mailing Address 2212 Dalewood Road			M M / D D / Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4583
	Timonium FEC ID number of contributing federal political committee.	MD	21093	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 400.00]
ſ	SUBTOTAL of Receipts This Page (optional)		•	150.00
	TOTAL This Period (last page this line number	only)		

				FOR LINE NUMBER: PAGE 21/29
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 29 (check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and Sta	atements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions
	or for commercial purposes, other than using the r	name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	FIRST COLONIES ANESTHESIA ASSO	DCIATES L	LC POLITICAL ACTION CO	OMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Jeremy Roth			Date of Receipt
	Mailing Address 913 Hillstead Drive	M M / D D / Y Y Y Y 10 24 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4526
	Lutherville	MD	21093	Amount of Each Receipt this Period
	FEC ID number of contributing	•		30.00
	federal political committee.	C		
	Name of Employer First Colonies Anesthesia	Occupatio	n	payroll deduction
		Physicia		_
	Receipt For: Primary General	Aggregate	e Year-to-Date	
	Other (specify)		240.00	
		0 0		
_	Full Name (Last, First, Middle Initial)			
В.	Dr. Alexander Rubin			Date of Receipt
	Mailing Address 6611 Hunter Trail Way			10 ²⁴ 2008
	City	State	Zip Code	Transaction ID: SA11AI.4544
	Frederick	MD	21702	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer First Colonies Anesthesia	Occupatio	n	payroll deduction
		Physicia	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify)		400.00	
		0 0	0 0 0 0 0 0 0	
С.	Full Name (Last, First, Middle Initial) Dr. Suzanne Scattergood			Date of Receipt
0.	Mailing Address 14700 Crossway Road			
				10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4545
	Rockville	MD	20853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	·			payroll deduction
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		
	Receipt For:	,	e Year-to-Date 🔻	-1
	Primary General	riggrogai		1
	Other (specify) v		800.00	1
	SUBTOTAL of Receipts This Page (optional)		•••••	180.00
	TOTAL This Period (last page this line number o	nly)		

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/29
			for each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may and ac	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	FIRST COLONIES ANESTHESIA ASS	SOCIATES	LLC POLITICAL ACTION CO	OMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Gerald Scheinman			Date of Receipt
	Mailing Address 8010 Summer Mill Con	M · M / D · D / Y		
	City	State	Zip Code	Transaction ID: SA11AI.4564
	Bethesda	MD	20817	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For:		te Year-to-Date 🔻	_
	Primary General		400.00	
	Other (specify)	0 0		
в.	Full Name (Last, First, Middle Initial) Dr. Nader Soliman			Date of Receipt
	Mailing Address 22905 David Mill Road	Ł		M - M / D - D / Y - Y - Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4565
	<u>Germantown</u>	MD	20876	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For:	1 1	te Year-to-Date 🔻	
	Primary General Other (specify) ▼		400.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Robert Study			Date of Receipt
0.	Mailing Address 6 Beall Spring Court			$\begin{array}{c c} & \text{Date of Receipt} \\ \hline \\ & \text{M} & \text{M} & \text{/} & \text{D} & \text{D} & \text{/} & \text{Y} & \text{Y} & \text{Y} \\ \hline 1 & 0 & 2 & 4 & 2 & 0 & 0 & 8 \end{array}$
	City	State	Zip Code	Transaction ID: SA11AI.4592
	Potomac	MD	20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupation Physicia		payroll deduction
	Receipt For:	1 · · ·	te Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	400.00	
[SUBTOTAL of Receipts This Page (optional)	I		150.00
	TOTAL This Period (last page this line number			
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9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 23 / 29
			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	∟ y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	FIRST COLONIES ANESTHESIA AS	SOCIATES L	LC POLITICAL ACTION CC	DMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Lisa Sullivan			Date of Receipt
	Mailing Address 2454 Five Schillings F	10 [/] 24 [/] 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4546
	Frederick	MD	21701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthsia	Occupation Physician		payroll deduction
	Receipt For:	- I	e Year-to-Date 🔻	_
	Primary General	, iggi oguio		1
	Other (specify)	0 0	400.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Robert Sullivan	-		Date of Receipt
	Mailing Address 2454 Five Schillings F	Road		M M / D D / Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4547
	Frederick	MD	21701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		 payroll deduction
	Receipt For:		Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	400.00]
- C.	Full Name (Last, First, Middle Initial) Dr. Louis Swann			Date of Receipt
•	Mailing Address PO Box 6081			M M / D D / Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4593
	McLean	VA	22106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		 payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	400.00]
ſ	SUBTOTAL of Receipts This Page (optional)			150.00
ŀ	TOTAL This Period (last page this line number			

			FOR LINE NUMBER: PAGE 24 / 29		
SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)					
FIRST COLONIES ANESTHESIA AS	FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COM				
Full Name (Last, First, Middle Initial) Dr. John Tam			Date of Receipt		
City	State	Zip Code	Transaction ID: SA11AI.4566		
Potomac	MD	20854	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction		
Receipt For:		e Year-to-Date 🔻	-1		
Primary General	, iggi oguto		1		
Other (specify)	0 0	400.00			
Full Name (Last, First, Middle Initial) Dr. Rojack Tan			Date of Receipt		
Mailing Address 507 Goodland Place			M M / D D / Y Y Y Y 10 24 2008		
City	State	Zip Code	Transaction ID: SA11AI.4594		
Rockville	MD	20850	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction 		
Receipt For:		e Year-to-Date 🔻	_		
Primary General	, iggi ogut		1		
Other (specify)		400.00			
Full Name (Last, First, Middle Initial) Dr. Bernard Tsai	•		Date of Receipt		
Mailing Address 10013 New London I	Drive		M M / D D / Y Y Y Y 10 24 2008		
City	State	Zip Code	Transaction ID: SA11AI.4567		
Potomac	MD	20854	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction 		
Receipt For:	Aggregate	e Year-to-Date 🔻			
Primary General Other (specify) ▼	0 0	400.00]		
SUBTOTAL of Receipts This Page (optional)			150.00		
TOTAL This Period (last page this line number		·			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	tements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions for the purpose of soliciting contributions for the purpose of soliciting contributions
	or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSO			
A.	Full Name (Last, First, Middle Initial) Dr. Arnaldo Valedon Mailing Address 22 Woodfield Court			Date of Receipt
				10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4527
	Reisterstown	MD	21136	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio		payroll deduction
		Physicia		
	Receipt For: Primary General	Aggregate	e Year-to-Date	-
	Other (specify)	0 0	400.00	
- B.	Full Name (Last, First, Middle Initial) Dr. Martha Van Clief			Date of Receipt
	Mailing Address 405 Apple Grove Road			M M / D D / Y Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4528
	Silver Spring	MD	20904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		 payroll deduction
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		400.00]
- C.	Full Name (Last, First, Middle Initial) Dr. Paul Van Nice			Date of Receipt
	Mailing Address 71401 Meadow Lane			M M / D D / Y Y Y Y Y 10 24 2008
	City	State	Zip Code	Transaction ID: SA11AI.4568
	Chevy Chase	MD	20815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	400.00]
	SUBTOTAL of Receipts This Page (optional)		······	150.00
	TOTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC F ITEMIZED RECEIPTS Any information copied from such	Reports and Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER: PAGE 26 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 con for the purpose of soliciting contributions	
NAME OF COMMITTEE (In F	r for commercial purposes, other than using the name and address of any political committee to s NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION CON			
Full Name (Last, First, Middle Dr. Mark Vogt Mailing Address 1149 Cold	,		Date of Receipt	
City	State	Zip Code	Transaction ID: SA11AI.4596	
McLean	VA	22101	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		50.00	
Name of Employer First Colonies Anesthesia Receipt For: Primary Gener Other (specify)	00 0		payroll deduction	
Full Name (Last, First, Middle Dr. Christopher Wahlgren	Full Name (Last, First, Middle Initial)			
	0 1 1	7:0.1	10 24 2008	
City Great Falls	State VA	Zip Code 22066	Transaction ID: SA11AI.4569	
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction	
Receipt For: Primary Gener Other (specify) ▼	00 0	e Year-to-Date ▼ 400.00		
Full Name (Last, First, Middle Dr. Timothy Wex	Initial)		Date of Receipt	
Mailing Address 11429 Ce	dar Ridge Drive		M M / D D / Y Y Y Y 10 24 2008	
City	State	Zip Code	Transaction ID: SA11AI.4597	
Potomac	VA	20854	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		50.00	
Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction	
Receipt For: Primary Gener Other (specify) ▼		e Year-to-Date ▼ 400.00		
SUBTOTAL of Receipts This Pa	age (optional)		150.00	
TOTAL This Period (last page th				

ſ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 27 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions for the purpose of soliciting contributions for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
A.	Full Name (Last, First, Middle Initial) Dr. David Wheeler Mailing Address 7108 Collingwood Cou	Date of Receipt		
		01-11-	7' . 0	10 24 2008
	City <u>Elkridge</u>	State MD	Zip Code 21075	Transaction ID: SA11AI.4584
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physicia Aggregate		payroll deduction
	Primary General Other (specify) ▼		400.00]
в.	Full Name (Last, First, Middle Initial) Dr. Thomas Wherry Mailing Address 611 W. 2nd Street			Date of Receipt
	City	State	Zip Code	
	Frederick	MD	21701	Transaction ID: SA11AI.4529 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date 400.00]
- с.	Full Name (Last, First, Middle Initial) Dr. Howard Wilpon			Date of Receipt
	Mailing Address 18212 Wickham Road			10 ^{//} 24 [/] 2008
	City	State	Zip Code	Transaction ID: SA11AI.4530
	<u>Olney</u> FEC ID number of contributing federal political committee.	C	20832	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 400.00]
ſ	SUBTOTAL of Receipts This Page (optional)	•		150.00
	TOTAL This Period (last page this line number	only)		

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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate sche for each category o Detailed Summary	f the	FOR LINE NUMBER: PAGE 28 / 29 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to so				for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA AS	SOCIATES L	LC POLITICAL AC		/MITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Aiqin Yu				Date of Receipt
	Mailing Address 13508 Gumspring Road				M M / D D / Y Y Y Y 10 24 2008
	City	State	Zip Code		Transaction ID: SA11AI.4570
	Rockville	MD	20850		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicial			payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V	00.00	
В.	Full Name (Last, First, Middle Initial) Dr. Jungim Yun				Date of Receipt
	Mailing Address 2057 Thurston Road				10 ² 24 ² 2008
	City	State	Zip Code		Transaction ID: SA11AI.4548
	Frederick	MD	21704		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicial			payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻	00.00	

SUBTOTAL of Receipts This Page (optional)	►	100.00
TOTAL This Period (last page this line number only)	►	3555.00

S	CHEDULE B (FEC Form 3	3X)		NUMBER: PAGE 29/29
	TEMIZED DISBURSEMEN	² Use separate sche	dule(s) (check onl	
1	I EMIZED DISBURSEMEN	TS for each category of Detailed Summary		22 23 24 25 26
		,,	27	28a 28b 28c X 29 30b
	ny Information copied from such Reports			
0	r for commercial purposes, other than usir	ig the name and address of any	political committee to so	licit contributions from such committee
	NAME OF COMMITTEE (In Full)			
	FIRST COLONIES ANESTHESIA	ASSOCIATES LLC POLIT	ICAL ACTION CON	MITTEE
Ľ				
Α.	Full Name (Last, First, Middle Initial)			Transaction ID: SB29.4521
~ .	Barbara Marx Brocato & Associat	es		Date of Disbursement
	Mailing Address 18 Pinkney Stre	ot		1 1 ^M / ^D 0 3 / ^Y 2 0 0 8
	To Finking Steeress			
	City	State Zip Cod	e	Amount of Each Disbursement this Period
	Annapolis	MD 21401		
	Purpose of Disbursement			1000.00
	lobbying fees			
	Candidate Name		Category/	
			Туре	
	Office Sought: House	Disbursement For:		
	Senate President	Other (specify) ▼	eneral	
	State: District:			
	Full Name (Last, First, Middle Initial)			
В.	Katherine Klausmeier			Transaction ID: SB29.4522 Date of Disbursement
	Mailing Address 4100 Walter Av	е.		$\begin{array}{c} \stackrel{M}{11} \stackrel{M}{11} \stackrel{M}{11} \stackrel{I}{11} \stackrel{D}{11} \stackrel{I}{11} \stackrel{Y}{2008} \stackrel{Y}{08} \stackrel{Y}{11} Y$
	City	State Zip Cod		Amount of Each Disbursement this Period
	Baltimore	MD 21236		250.00
	Purpose of Disbursement contribution			200.00
	Candidate Name		Category/	
	Katherine Klausmeier		Type	
	Office Sought: House	Disbursement For:	71	
	X Senate		eneral	
	President	Other (specify)		
	State: MD District:			

SUBTOTAL of Disbursements This Page (optional)	•	1250.00
TOTAL This Period (last page this line number only)		1250.00

FE6AN026

FEC Schedule B (Form 3X) (Revised 02/2003)