Image# 12970872046 PAGE 1 / 54

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

| | For Other Than An Aut | nonzed Committee | Office Use Only |
|------------------------------------------------------------|---------------------------------|------------------------------------------|----------------------------------------------------|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If typing, type over the lines. | 12FE4M5 |
| MVP Health Care Inc. | Federal PAC | | |
| | | | |
| ADDRESS (number and street) | 625 State Street | | |
| Check if different | | | |
| than previously reported. (ACC) | Schenectady | | NY 12305 - |
| 2. FEC IDENTIFICATION N | UMBER ▼ CIT | ΓY▲ | STATE ▲ ZIP CODE ▲ |
| C C00431429 | | S THIS NEW (N) C | R AMENDED (A) |
| 4. TYPE OF REPORT (Choose One) | Report Due On: | 20 (M2) May 20 (| (Non-Election Year Only) |
| (a) Quarterly Reports: | | · 20 (M3) Jun 20 (M | (Non-Election Year Only) |
| April 15 Quarterly Report (0 | | 20 (M4) Jul 20 (M | |
| July 15 Quarterly Report (0 | (c) 12-Day | Primary (12P) | General (12G) Runoff (12R) |
| October 15 Quarterly Report (0 | Report for the: | Convention (12C) | Special (12S) |
| X January 31 Year-End Report (Y | Fleetie | on on | in the State of |
| July 31 Mid-Year Report (Non-electio Year Only) (MY) | (d) 30-Day | General (30G) | Runoff (30R) Special (30S) |
| Termination Report (TER) | | on on | in the State of |
| 5. Covering Period 11 | | through 12 | M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| I certify that I have examined the | nis Report and to the best of | my knowledge and belief it i | s true, correct and complete. |
| Type or Print Name of Treasure | er Mr. Frank Fanshawe | | |
| Signature of Treasurer Mr. I | Frank Fanshawe | [Electronically Filed] | Date 04 / 10 / 2012 |
| NOTE: Submission of false, erron | eous, or incomplete information | n may subject the person signi | ng this Report to the penalties of 2 U.S.C. §437g. |
| Office Use Only | | | FEC FORM 3X Rev. 12/2004 |

SUMMARY PAGE

| FEC Form 3X (Rev. 02/2003) | OF RECEIPTS AND DISBURSEMENTS | Page 2 |
|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------|
| Write or Type Committee Name | | <u> </u> |
| MVP Health Care Inc. Federal PAC | | |
| Report Covering the Period: From: | 1 23 / 2010 To | o: 12 / 31 / 2010 |
| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
| 6. (a) Cash on Hand January 1, 2010 | | 36764.84 |
| (b) Cash on Hand at Beginning of Reporting Period | 40532.34 | |
| (c) Total Receipts (from Line 19) | 4920.00 | 47740.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 45452.34 | 84504.84 |
| 7. Total Disbursements (from Line 31) | 12.00 | 39064.50 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 45440.34 | 45440.34 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 483.00 | |
| This committee has qualified as a multica | andidate 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. 06/2004)

Write or Type Committee Name

| M١ | /P | Health | Care | Inc. | Federal | PAC |
|----|----|--------|------|------|----------------|-----|
| | | | | | | |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|----------------------------------------------|-------------------------------|-----------------------------------|
| . Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | 2010.00 | 30155.00 |
| (i) Itemized (use Schedule A) | 3910.00 | 30133.00 |
| (ii) Unitemized | 1010.00 | 17585.00 |
| (iii) TOTAL (add | | |
| Lines 11(a)(i) and (ii)▶ | 4920.00 | 47740.00 |
| (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)▶ | 4920.00 | 47740.00 |
| . Transfers From Affiliated/Other | | |
| Party Committees | 0.00 | 0.00 |
| . All Loans Received | 0.00 | 0.00 |
| | 7 | |
| . Loan Repayments Received | 0.00 | 0.00 |
| . Offsets To Operating Expenditures | 7 | |
| (Refunds, Rebates, etc.) | | |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| . Refunds of Contributions Made | 7 | |
| to Federal Candidates and Other | | |
| Political Committees | 0.00 | 0.00 |
| . Other Federal Receipts | | |
| (Dividends, Interest, etc.) | 0.00 | 0.00 |
| . Transfers from Non-Federal and Levin Funds | 7 | |
| (a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| | | |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (a) Total Transfers (add 19(a) and 19(b)) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | |
| . Total Receipts (add Lines 11(d), | 4000.00 | 47740.0 |
| 12, 13, 14, 15, 16, 17, and 18(c))▶ | 4920.00 | 47740.00 |
| . Total Federal Receipts | | |
| (subtract Line 18(c) from Line 19)▶ | 4920.00 | 47740.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| | II. Disbursements | Total This Period | | | |
|-----|---------------------------------------------------------------------------------------|-------------------|-----------------------|--|--|
| 21. | Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | Calendar Year-to-Date | | |
| | (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 | 0.00 | 0.00 | | |
| 2 | (add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party | 0.00 | 0.00 | | |
| | Committees | 0.00 | 0.00 | | |
| 23. | Contributions to Federal Candidates/Committees | | | | |
| | and Other Political Committees | 0.00 | 39000.00 | | |
| 4. | Independent Expenditures (use Schedule E) | 0.00 | 0.00 | | |
| 25. | Coordinated Party Expenditures (2 U.S.C. §441a(d)) | 7 7 | | | |
| | (use Schedule F) | 0.00 | 0.00 | | |
| 06 | Lean Renovmente Made | 0.00 | 0.00 | | |
| 20. | Loan Repayments Made | 0.00 | 0.00 | | |
| 27. | Loans Made | 0.00 | 0.00 | | |
| 28. | Refunds of Contributions To: (a) Individuals/Persons Other | | 47.00 | | |
| | Than Political Committees | 12.00 | 47.00 | | |
| | (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))▶ | 12.00 | 47.00 | | |
| | | | | | |
| 29. | Other Disbursements | 0.00 | 17.50 | | |
| 30. | Federal Election Activity (2 U.S.C. §431(20)) | | | | |
| | (a) Allocated Federal Election Activity | | | | |
| | (from Schedule H6) | 0.00 | 0.00 | | |
| | (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 | | |
| | Enics 50(a)(i), 50(a)(ii) and 50(b)) | 7 | 7 | | |
| 1. | Total Disbursements (add Lines 21(c), 22, | | | | |
| | 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 12.00 | 39064.50 | | |
| 32. | Total Federal Disbursements | | | | |
| | (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | | |
| | from Line 31) | 12.00 | 39064.50 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | | | |
|----------------------------------------------------------------------------|---------|----------|--|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 4920.00 | 47740.00 | |
| 4. Total Contribution Refunds (from Line 28(d)) | 12.00 | 47.00 | |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4908.00 | 47693.00 | |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 | |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 | |
| 8. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 | |

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF

| TEMIZED RECEIPTS | for each category of the Detailed Summary Page | (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Any information copied from such Reports and Statements or for commercial purposes, other than using the name an | | |
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC | | |
| Pagaint For: | Zip Code 12306 tion er, Medicare Sales ate Year-to-Date ▼ | Date of Receipt 12 30 2010 Transaction ID: SA11AI.9853 Amount of Each Receipt this Period 10.00 |
| Full Name (Last, First, Middle Initial) Ms. Mary Bianchi Mailing Address 6 Doris Drive | | Date of Receipt 12 02 2010 |
| City State Scotia NY FEC ID number of contributing federal political committee. Name of Employer Occupa VP, Sale Receipt For: Primary General Other (specify) ▼ State NY C Aggregation | | Transaction ID: SA11AI.9864 Amount of Each Receipt this Period 30.00 |
| Full Name (Last, First, Middle Initial) Ms. Mary Bianchi Mailing Address 6 Doris Drive City Scotia NY FEC ID number of contributing federal political committee. Name of Employer Occupa VP, Sale NY Service Corp Receipt For: Primary General Other (specify) Occupa Aggregical Other (specify) | | Date of Receipt 12 16 2010 Transaction ID: SA11AI.9865 Amount of Each Receipt this Period 30.00 |
| SUBTOTAL of Receipts This Page (optional) | | 70.00 |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF

| TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | (check only one) X 11a |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports a or for commercial purposes, other than using | nd Statements may | y not be sold or used by any p ddress of any political committed | erson for the purpose of soliciting contributions to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Feder | al PAC | | |
| Full Name (Last, First, Middle Initial) Ms. Mary Bianchi Mailing Address 6 Doris Drive City Scotia FEC ID number of contributing federal political committee. Name of Employer MVP Service Corp Receipt For: Primary General Other (specify) | State NY C Occupation VP, Sales O Aggregate Y | Zip Code 12302 ps Year-to-Date ▼ | Date of Receipt 12 30 2010 Transaction ID: SA11AI.9866 Amount of Each Receipt this Period 30.00 |
| Full Name (Last, First, Middle Initial) Sue Ann Brown Mailing Address 9 Wembly Court City Delmar FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify) | State NY C Occupation Administrativ Aggregate | Zip Code 12054 | Date of Receipt 12 02 2010 Transaction ID: SA11AI.9873 Amount of Each Receipt this Period 20.00 |
| Full Name (Last, First, Middle Initial) Sue Ann Brown Mailing Address 9 Wembly Court City Delmar FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify) | | Zip Code 12054 ve Year-to-Date ▼ 500.00 | Date of Receipt 12 16 2010 Transaction ID : SA11AI.9874 Amount of Each Receipt this Period 20.00 |
| CURTOTAL of Descripto This Descriptions | J) | | 70.00 |

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

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

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

| FOR LINE NUMBER: | | | | PAGE | 8 | OF | 54 | | |
|------------------|-----|---------|----|------|---|-----|----|--|----|
| (0 | che | ck only | or | ne) | | | | | |
| | 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 | | |
|----------------------------------------------------------------------------------------------------|---------------------------------|------------------------------------|
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal F | 200 | |
| / MIVE Health Care Inc. Federal F | -AC | |
| Full Name (Last, First, Middle Initial) A. Sue Ann Brown | | Date of Receipt |
| Mailing Address 9 Wembly Court | | 12 30 2010 |
| City | State Zip Code | Transaction ID : SA11AI.9875 |
| Delmar | NY 12054 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer | Occupation | |
| MVP | Administrative | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 0.0 | |
| Other (specify) ▼ | 520.00 | |
| Full Name (Last, First, Middle Initial) Carl Cameron | | Date of Receipt |
| Mailing Address 285 Willowcrest Drive | | 12 02 2010 _ |
| City | State Zip Code | Transaction ID : SA11AI.9876 |
| Rochester | NY 14618 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer | Occupation | |
| MVP | VP Medical Director | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 720.00 | |
| Full Name (Last, First, Middle Initial) Carl Cameron | | Date of Receipt |
| Mailing Address 285 Willowcrest Drive | | 12 16 _ 2010 _ |
| City | State Zip Code | Transaction ID : SA11AI.9877 |
| Rochester | NY 14618 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer | Occupation | |
| MVP | VP Medical Director | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 750.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 80.00 |
| TOTAL This Period (last page this line number | only) | |

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

| FOR LINE NUMBER: | | | PAGE | | 9 | OF | 54 | |
|------------------|----|-----|------|-----|---|----|----|----|
| (check only one) | | | | | | | | |
| X 1 | 1a | 11b | | 11c | | 12 | | |
| 13 | 3 | 14 | | 15 | | 16 | | 17 |

| | tatements may not be sold or used by any person name and address of any political committee to | |
|------------------------------------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------|
| NAME OF COMMITTEE (In Full) | 24.0 | |
| MVP Health Care Inc. Federal F | YAU | |
| Full Name (Last, First, Middle Initial) Carl Cameron | | Date of Receipt |
| Mailing Address 285 Willowcrest Drive | 12 30 2010 | |
| City | State Zip Code | Transaction ID : SA11AI.9878 |
| Rochester | NY 14618 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 30.00 |
| Name of Employer | Occupation | |
| MVP | VP Medical Director | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 780.00 | |
| Full Name (Last, First, Middle Initial) Laura Davis | | Date of Receipt |
| Mailing Address 212 Meriline Ave. | | 12 02 2010 |
| City | State Zip Code | Transaction ID : SA11AI.9893 |
| Scotia | NY 12302 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 20.00 |
| Name of Employer | Occupation | |
| MVP Health Care Inc | Clinical Pharmacist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |
| Full Name (Last, First, Middle Initial) C. Laura Davis | | Date of Receipt |
| Mailing Address 212 Meriline Ave. | | 12 16 _ 2010 _ |
| City | State Zip Code | Transaction ID : SA11AI.9894 |
| Scotia | NY 12302 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer | Occupation | |
| MVP Health Care Inc | Clinical Pharmacist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 70.00 |
| TOTAL This Period (last page this line number | only) | |

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Laura Davis Date of Receipt Mailing Address 212 Meriline Ave. 30 2010 12 City Zip Code State Transaction ID: SA11AI.9895 NY Scotia 12302 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation MVP Health Care Inc Clinical Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 12 02 2010 City State Zip Code Transaction ID: SA11AI.9896 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP Regional Network Director Receipt For: Aggregate Year-to-Date ▼ Primary General 870.00 Other (specify) Full Name (Last, First, Middle Initial) c. Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive M = M 12 16 2010 City State Zip Code Transaction ID: SA11AI.9897 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Regional Network Director MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 910.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c

OF

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12 Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 30 2010 12 City Zip Code State Transaction ID: SA11AI.9898 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP Regional Network Director Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Frank Fanshawe Date of Receipt Mailing Address 430 Ridgehill Road 12 02 2010 City State Zip Code Transaction ID: SA11AI.9905 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 860.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Frank Fanshawe Date of Receipt Mailing Address 430 Ridgehill Road M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.9906 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation MVP Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Mr. Frank Fanshawe Date of Receipt Mailing Address 430 Ridgehill Road 30 2010 12 City State Zip Code Transaction ID: SA11AI.9907 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 940.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kathleen Fish Date of Receipt Mailing Address 500 Normanskill Place 12 31 2010 City State Zip Code Transaction ID: SA11AI.9916 Slingerlands NY 12159 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Fish Date of Receipt Mailing Address 500 Normanskill Place M = M 02 12 2010 City Zip Code State Transaction ID: SA11AI.9917 NY Slingerlands 12159 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation EVP, CFO MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 1260.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 2010 12 16 City State Zip Code Transaction ID: SA11AI.9918 NY Slingerlands 12159 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation MVP EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 1320.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 30 12 2010 City State Zip Code Transaction ID: SA11AI.9919 Slingerlands NY 12159 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation MVP EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 1380.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Gajewski Date of Receipt Mailing Address 166 Jordan Blvd M M / 03 12 2010 City Zip Code State Transaction ID: SA11AI.9926 NY Delmar 12054 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Director EPMO MVP Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF 54 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Dominic Galante Date of Receipt Mailing Address 220 Alexander Street 2010 12 16 City Zip Code State Transaction ID: SA11AI.9930 NY Rochester 14607 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation VP Medical Quality Management MVP Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dominic Galante Date of Receipt Mailing Address 220 Alexander Street 12 30 2010 City State Zip Code Transaction ID: SA11AI.9931 NY Rochester 14607 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP Health Care VP Medical Quality Management Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joyce Gallimore Date of Receipt Mailing Address 3 Bay Crest Drive 02 12 2010 City State Zip Code Transaction ID: SA11AI.9935 South Burlington VT 05403 Amount of Each Receipt this Period FEC ID number of contributing 0.00 С federal political committee. Name of Employer Occupation Administrative MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 258.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Michael Gauci Date of Receipt Mailing Address 329 Mohawk Ave 2010 Apt 4 12 31 City State Zip Code Transaction ID: SA11AI.9938 NY Scotia 12302 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Health Care Associate Director Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bill Geddings Date of Receipt Mailing Address 75 Robinwood Drive 12 02 2010 City State Zip Code Transaction ID: SA11AI.9939 Clifton Park NY 12065 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation MVP VP Health Services Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bill Geddings Date of Receipt Mailing Address 75 Robinwood Drive M M / 12 16 2010 City Zip Code State Transaction ID: SA11AI.9940 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation **VP Health Services** MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

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| | Statements may not be sold or used by any persone name and address of any political committee to | |
|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal | PAC | |
| Full Name (Last, First, Middle Initial) A. Bill Geddings Mailing Address 75 Robinwood Drive | State 7in Code | Date of Receipt 12 30 2010 |
| City Clifton Park | State Zip Code NY 12065 | Transaction ID : SA11AI.9941 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 20.00 |
| Name of Employer | Occupation | |
| MVP Receipt For: Primary General Other (specify) ▼ | VP Health Services Aggregate Year-to-Date ▼ 520.00 | |
| Full Name (Last, First, Middle Initial) Patrick Glavey Mailing Address 165 Windemere Road | | Date of Receipt 12 02 _2010 _ |
| City | State Zip Code | Transaction ID : SA11AI.9945 |
| Rochester | NY 14610 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 80.00 |
| Name of Employer MVP | Occupation VP, Medicare Products | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1740.00 | |
| Full Name (Last, First, Middle Initial) C. Patrick Glavey | | Date of Receipt |
| Mailing Address 165 Windemere Road | | 12 16 2010 |
| City Rochester | State Zip Code NY 14610 | Transaction ID : SA11AI.9946 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 80.00 |
| Name of Employer | Occupation | - |
| MVP | VP, Medicare Products | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1820.00 | |
| SUBTOTAL of Receipts This Page (optional) | > | 180.00 |
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FOR LINE NUMBER: PAGE 18 OF 54 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Patrick Glavey Date of Receipt Mailing Address 165 Windemere Road 30 2010 12 City Zip Code State Transaction ID: SA11AI.9947 NY Rochester 14610 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. Name of Employer Occupation MVP VP, Medicare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Denise Gonick Date of Receipt Mailing Address 803 Via Marchella 12 02 2010 City State Zip Code Transaction ID: SA11AI.9948 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 70.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. **EVP & Chief Legal Officer** Receipt For: Aggregate Year-to-Date ▼ Primary General 1580.00 Other (specify) Full Name (Last, First, Middle Initial) c. Denise Gonick Date of Receipt Mailing Address 803 Via Marchella M M / 12 16 2010 City Zip Code State Transaction ID: SA11AI.9949 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 70.00 С federal political committee. Name of Employer Occupation **EVP & Chief Legal Officer** MVP Health Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1650.00 Other (specify) 220.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Denise Gonick Date of Receipt Mailing Address 803 Via Marchella 30 2010 12 City Zip Code State Transaction ID: SA11AI.9950 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing C 70.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. **EVP & Chief Legal Officer** Receipt For: Aggregate Year-to-Date ▼ Primary General 1720.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Greppo Date of Receipt Mailing Address 134 Overlook Lane 12 02 2010 City State Zip Code Transaction ID: SA11AI.9951 NY Duanesburg 12056 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP IT Ombudsman Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael Greppo Date of Receipt Mailing Address 134 Overlook Lane M M / 12 16 2010 City Zip Code State Transaction ID: SA11AI.9952 NY Duanesburg 12056 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation IT Ombudsman MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Michael Greppo Date of Receipt Mailing Address 134 Overlook Lane 30 2010 12 City State Zip Code Transaction ID: SA11AI.9953 NY Duanesburg 12056 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP IT Ombudsman Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 12 02 2010 City State Zip Code Transaction ID: SA11AI.9957 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Name of Employer Occupation MVP Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1920.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Christopher Henchey Date of Receipt Mailing Address 144 Berry Road M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.9958 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 80.00 С federal political committee. Name of Employer Occupation Vice President MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 170.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 30 2010 12 City Zip Code State Transaction ID: SA11AI.9959 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. Name of Employer Occupation MVP Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 2080.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rosemarie Hogan Date of Receipt Mailing Address 45 Crestwood Drive 12 03 2010 City State Zip Code Transaction ID: SA11AI.9966 NY Schenectady 12306 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rosemarie Hogan Date of Receipt Mailing Address 45 Crestwood Drive M = M 12 17 2010 City Zip Code State Transaction ID: SA11AI.9967 NY Schenectady 12306 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Administrative MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Rosemarie Hogan Date of Receipt Mailing Address 45 Crestwood Drive 2010 12 31 City State Zip Code Transaction ID: SA11AI.9968 NY Schenectady 12306 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Gary Hughes Date of Receipt Mailing Address 1602 Bradley Street 12 02 2010 City State Zip Code Transaction ID: SA11AI.9972 NY Schenectady 12309 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gary Hughes Date of Receipt Mailing Address 1602 Bradley Street M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.9973 NY Schenectady 12309 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation Administrative MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

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| | Statements may not be sold or used by any pers he name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal | PAC | |
| Full Name (Last, First, Middle Initial) Kevin Husted Mailing Address 38 Fox Hill Drive | | Date of Receipt 12 30 2010 |
| City Fairport FEC ID number of contributing | State Zip Code NY 14450 | Transaction ID : SA11AI.9980 Amount of Each Receipt this Period |
| federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify) Other | Occupation VP Information Technology Aggregate Year-to-Date ▼ 780.00 | 30.00 |
| Full Name (Last, First, Middle Initial) Dawn Jablonski Mailing Address 213 Hansen Ave | | Date of Receipt |
| City Albany FEC ID number of contributing federal political committee. | State Zip Code NY 12208 | Transaction ID : SA11AI.9984 Amount of Each Receipt this Period 40.00 |
| Name of Employer MVP Health Care Receipt For: □ Primary □ General Other (specify) ▼ | Occupation VP of Legal Affairs Aggregate Year-to-Date ▼ 870.00 | |
| Full Name (Last, First, Middle Initial) Dawn Jablonski Mailing Address 213 Hansen Ave City | State Zip Code NY 12208 | Date of Receipt 12 17 2010 Transaction ID : SA11AI.9985 |
| Albany FEC ID number of contributing federal political committee. Name of Employer MVP Health Care Receipt For: □ Primary □ General Other (specify) ▼ | Occupation VP of Legal Affairs Aggregate Year-to-Date ▼ 910.00 | Amount of Each Receipt this Period 40.00 |
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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Dawn Jablonski Date of Receipt Mailing Address 213 Hansen Ave 2010 12 31 City Zip Code State Transaction ID: SA11AI.9986 NY Albany 12208 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP Health Care VP of Legal Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) B. William John Date of Receipt Mailing Address 5 Sonat Road 12 02 2010 City State Zip Code Transaction ID: SA11AI.9990 Clifton Park NY 12065 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. William John Date of Receipt Mailing Address 5 Sonat Road M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.9991 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation Administrative MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) William John Date of Receipt Mailing Address 5 Sonat Road 30 2010 12 City Zip Code State Transaction ID : SA11AI.9992 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) B. Barbara Leonard Date of Receipt Mailing Address 848 DeCamp Avenue 12 02 2010 City State Zip Code Transaction ID: SA11AI.9999 NY Schenectady 12309 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Barbara Leonard Date of Receipt Mailing Address 848 DeCamp Avenue M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.10000 NY Schenectady 12309 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation Administrative MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may not be sold or used by any persone name and address of any political committee to | son for the purpose of soliciting contributions o solicit contributions from such committee. |
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| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal | PAC | |
| Full Name (Last, First, Middle Initial) Barbara Leonard Mailing Address 848 DeCamp Avenue | | Date of Receipt |
| Maining Address 646 DeCamp Avenue | | 12 30 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10003 |
| Schenectady | NY 12309 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer | Occupation | - |
| MVP | Administrative | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 260.00 | |
| Full Name (Last, First, Middle Initial) Joseph Lia | | Date of Receipt |
| Mailing Address 12 Sutherland Drive | | 12 02 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10007 |
| Highland Mills | NY 10930 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer | Occupation | 1 |
| MVP | VP of Mid-Hudson Region | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 720.00 | |
| Full Name (Last, First, Middle Initial) | 1 | Date of Receipt |
| Mailing Address 12 Sutherland Drive | | 12 16 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10008 |
| Highland Mills | NY 10930 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer | Occupation | 1 |
| MVP | VP of Mid-Hudson Region | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 750.00 | |
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| | nd Statements may not be sold or used by any per the name and address of any political committee | |
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa | al PAC | |
| Full Name (Last, First, Middle Initial) Joseph Lia Mailing Address 12 Sutherland Drive City Highland Mills FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify) | State Zip Code NY 10930 C Occupation VP of Mid-Hudson Region Aggregate Year-to-Date ▼ 780.00 | Date of Receipt 12 30 2010 Transaction ID: SA11AI.10009 Amount of Each Receipt this Period 30.00 |
| Full Name (Last, First, Middle Initial) William V. Little Mailing Address 300 Partridge Lane City Charlotte FEC ID number of contributing federal political committee. Name of Employer MVP Service Corp. Receipt For: Primary General Other (specify) | State Zip Code VT 05445 C Occupation VP Vermont Aggregate Year-to-Date ▼ 720.00 | Date of Receipt 12 02 2010 Transaction ID : SA11AI.10010 Amount of Each Receipt this Period 30.00 |
| Full Name (Last, First, Middle Initial) William V. Little Mailing Address 300 Partridge Lane City Charlotte FEC ID number of contributing federal political committee. Name of Employer MVP Service Corp. Receipt For: Primary General Other (specify) | State Zip Code VT 05445 C Occupation VP Vermont Aggregate Year-to-Date ▼ 750.00 | Date of Receipt 12 16 2010 Transaction ID: SA11AI.10011 Amount of Each Receipt this Period 30.00 |
| SUBTOTAL of Receipts This Page (optional |) | 90.00 |
| TOTAL This Period (last page this line num | ber only) | |

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| Any information copied from such Reports at or for commercial purposes, other than using | nd Statements may not be sold or used by any per g the name and address of any political committee | son for the purpose of soliciting contributions to solicit contributions from such committee. |
|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Feder | al PAC | |
| Full Name (Last, First, Middle Initial) William V. Little | | Date of Receipt |
| Mailing Address 300 Partridge Lane | | 12 30 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10012 |
| Charlotte | VT 05445 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer | Occupation | 1 |
| MVP Service Corp. | VP Vermont | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General Other (specify) ▼ | 780.00 | |
| Full Name (Last, First, Middle Initial) Carl Maleri Jr. | • | Date of Receipt |
| Mailing Address 19 Crimson Way | | 12 02 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10028 |
| Webster | NY 14580 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 40.00 |
| Name of Employer | Occupation | 1 |
| MVP | VP, Underwriting and Analysis | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General Other (specify) ▼ | 960.00 | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| Mailing Address 19 Crimson Way | | 12 16 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10029 |
| Webster | NY 14580 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 40.00 |
| Name of Employer | Occupation | 1 |
| MVP | VP, Underwriting and Analysis | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | | |
| Other (specify) ▼ | 1000.00 | |
| SUBTOTAL of Receipts This Page (optiona | ı) > | 110.00 |
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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Carl Maleri Jr. Date of Receipt Mailing Address 19 Crimson Way 30 2010 12 City State Zip Code Transaction ID: SA11AI.10030 NY Webster 14580 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP VP, Underwriting and Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 1040.00 Other (specify) Full Name (Last, First, Middle Initial) B. Augusta Martin Date of Receipt Mailing Address 457 Crescent Ave 12 02 2010 City State Zip Code Transaction ID: SA11AI.10031 NY Saratoga 12866 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP Health Care VP Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) Full Name (Last, First, Middle Initial) c. Augusta Martin Date of Receipt Mailing Address 457 Crescent Ave M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.10032 NY Saratoga 12866 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation MVP Health Care **VP Marketing** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 31 OF 54 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Augusta Martin Date of Receipt Mailing Address 457 Crescent Ave 30 2010 12 City State Zip Code Transaction ID: SA11AI.10033 NY Saratoga 12866 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Health Care VP Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. John McGrath Date of Receipt Mailing Address 210 Dorchester Road 12 30 2010 City State Zip Code Transaction ID: SA11AI.10039 NY Rochester 14610 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Contract Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) c. Laurie Metheny Date of Receipt Mailing Address 21 Joellen Drive 02 12 2010 City Zip Code State Transaction ID: SA11AI.10040 NY Rochester 14626 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation VP, Business Excellence MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 960.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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| Any information copied from such Reports or for commercial purposes, other than using | and Statements may not be sold or used by any pering the name and address of any political committee | son for the purpose of soliciting contributions to solicit contributions from such committee. |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Fede | ral PAC | |
| Full Name (Last, First, Middle Initial) Laurie Metheny Mailing Address 24 Jeelles Prins | | Date of Receipt |
| Mailing Address 21 Joellen Drive | | 12 16 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10041 |
| Rochester | NY 14626 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 40.00 |
| Name of Employer | Occupation | 1 |
| MVP | VP, Business Excellence | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | 1 |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) Laurie Metheny | | Date of Receipt |
| Mailing Address 21 Joellen Drive | | 12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : SA11AI.10042 |
| Rochester | NY 14626 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 40.00 |
| Name of Employer | Occupation | |
| MVP | VP, Business Excellence | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1040.00 | |
| Full Name (Last, First, Middle Initial) Donna Michele | | Date of Receipt |
| Mailing Address 24 Kraus Road | | 12 02 2010 |
| City | State Zip Code | Transaction ID : SA11AI.10043 |
| Albany | NY 12203 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer | Occupation | + |
| MVP | Administrative | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 240.00 | |
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| or for commercial purposes, other than using | and statements may not be sold or used by any per g the name and address of any political committee t | |
|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Feder | al PAC | |
| Full Name (Last, First, Middle Initial) Donna Michele Mailing Address 24 Kraus Road | | Date of Receipt |
| | 0) : 7: 7 : | 12 16 2010 |
| City Albany | State Zip Code NY 12203 | Transaction ID : SA11AI.10044 |
| Albany FEC ID number of contributing federal political committee. | C 12203 | Amount of Each Receipt this Period |
| Name of Employer | Occupation | † |
| MVP | Administrative | _ |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name /Lost First Middle 1999 | | |
| Full Name (Last, First, Middle Initial) Donna Michele | | Date of Receipt |
| Mailing Address 24 Kraus Road | | M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y |
| City | State Zip Code | 12 30 2010 Transaction ID : SA11Al.10045 |
| Albany | NY 12203 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 10.00 |
| Name of Employer | Occupation | _ |
| MVP | Administrative | _ |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| Mailing Address 54 Henderson Road | | M = M / D = D / Y = Y = Y |
| City | State Zip Code | 12 02 2010 Transaction ID : SA11AI.10046 |
| Glenmont | NY 12077 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer | Occupation | + |
| MVP | EVP, HR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 1200.00 | |
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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) James Morrill Date of Receipt Mailing Address 54 Henderson Road 2010 12 16 City State Zip Code Transaction ID: SA11AI.10047 NY 12077 Glenmont Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Morrill Date of Receipt Mailing Address 54 Henderson Road 12 30 2010 City State Zip Code Transaction ID: SA11AI.10048 NY Glenmont 12077 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kari Mysliwiec Date of Receipt Mailing Address 1 Vitucci Ct M M / 03 12 2010 City Zip Code State Transaction ID: SA11AI.10049 NY Cohoes 12047 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation MVP Health Care **Actuary Supervisor** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Kari Mysliwiec Date of Receipt Mailing Address 1 Vitucci Ct 2010 12 City Zip Code State Transaction ID: SA11AI.10050 NY Cohoes 12047 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Health Care Actuary Supervisor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kari Mysliwiec Date of Receipt Mailing Address 1 Vitucci Ct 12 31 2010 City State Zip Code Transaction ID: SA11AI.10051 NY Cohoes 12047 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Health Care Actuary Supervisor Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Odorizzi Date of Receipt Mailing Address 71 East Claremond Drive M M 02 12 2010 City Zip Code State Transaction ID: SA11AI.10058 NY Voorheesville 12186 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Director of Finance MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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 solicting contributions for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Richard Odorizzi Mailing Address 71 East Claremond Drive City State Zip Code NY 12186 FEC ID number of contributing federal political committee. Ricopif For: Primary General Other (specify) \(\psi \) Full Name (Last, First, Middle Initial) Richard Odorizzi Mailing Address 71 East Claremond Drive City State Zip Code NY 12186 Date of Receipt Date of Receipt Transaction ID: \$A11A1.10059 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10050 Transaction ID: \$A11A1.10050 Transaction ID: \$A11A1.10050 Amount of Each Receipt this Period Transaction ID: \$A11A1.10051 Transaction ID: \$A11A1.10051 Transaction ID: \$A11A1.10051 Amount of Each Receipt ID: \$A11A1.10051 Amount of Each Receipt ID: \$A11A1.10051 Amount of Each Receipt ID: \$A11A1.10051 Transaction ID: \$A11A1.10051 Transact | | | 1.0 |
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| Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Name of Employer Morheesville NY State City State | | | |
| A control Codorizzi Mailing Address 71 East Claremond Drive City Voorheesville NY 12186 FEC ID number of contributing dederal political committee. Name of Employer WVP Primary General Other (specify) ▼ State Zip Code NY 12186 Amount of Each Receipt this Period Transaction ID: SA11AL10059 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ 12 30 2010 Transaction ID: SA11AL10059 Amount of Each Receipt this Period FEC ID number of contributing dedrar political committee. NY 12186 Amount of Each Receipt this Period Transaction ID: SA11AL10060 Amount of Each Receipt this Period Transaction ID: SA11AL10060 Amount of Each Receipt this Period Transaction ID: SA11AL10060 Amount of Each Receipt this Period FEC ID number of contributing dedrar political committee. Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Aggregate Year-to-Date ▼ Transaction ID: SA11AL10059 Amount of Each Receipt this Period Transaction ID: SA11AL10059 Amount of Each Receipt this Period Transaction ID: SA11AL10059 Amount of Each Receipt this Period Transaction ID: SA11AL10059 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Amount of Each Receipt this Period Transaction ID: SA11AL10051 Transacti | , | al PAC | |
| Mailing Address 71 East Claremond Drive City Voorheesville NY 12186 FEC ID number of contributing federal political committee. Name of Employer MVP Health Care, Inc. Receipt For: City State Zip Code NY 12186 Amount of Each Receipt this Period Transaction ID: SA11Al.10060 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ To 20.00 Date of Receipt Transaction ID: SA11Al.10060 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11Al.10060 Amount of Each Receipt this Period Date of Receipt this Period Date of Receipt Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Date of Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Amount of Each Receipt this Period Transaction ID: SA11Al.10061 Transaction ID: SA11Al.10061 Amount of Each Receipt this Period | Mailing Address 71 East Claremond Drive City Voorheesville FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General | NY 12186 C Occupation Director of Finance Aggregate Year-to-Date ▼ | 12 16 2010 Transaction ID : SA11AI.10059 Amount of Each Receipt this Period |
| Date of Receipt Mailing Address 3 Clare Castle City Albany FEC ID number of contributing federal political committee. Name of Employer MVP Health Care, Inc. Receipt For: Primary Occupation Corp VP of Operations Aggregate Year-to-Date ▼ Transaction ID : SA11AI.10061 Amount of Each Receipt this Period Transaction ID : SA11AI.10061 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Table 12 Table 20 Transaction ID : SA11AI.10061 Amount of Each Receipt this Period Transaction ID : SA11AI.10061 Amount of Each Receipt this Period | Mailing Address 71 East Claremond Drive City Voorheesville FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General | NY 12186 C Occupation Director of Finance Aggregate Year-to-Date ▼ | 12 30 2010 Transaction ID : SA11AI.10060 Amount of Each Receipt this Period |
| SUBTOTAL of Receipts This Page (optional) | City Albany FEC ID number of contributing federal political committee. Name of Employer MVP Health Care, Inc. Receipt For: Primary General | NY 12205 C Occupation Corp VP of Operations Aggregate Year-to-Date ▼ | 12 02 2010 Transaction ID : SA11AI.10061 Amount of Each Receipt this Period |
| | SUBTOTAL of Receipts This Page (optional |) | 70.00 |

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54 Use separate schedule(s) for each category of the Detailed Summary Page 13 14 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Everret Patterson Date of Receipt Mailing Address 285 Pinebrook Drive 2010 12 City Zip Code State Transaction ID: SA11AI.10065 NY Hyde Park 12538 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Regional Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Everret Patterson Date of Receipt Mailing Address 285 Pinebrook Drive 12 31 2010 City State Zip Code Transaction ID: SA11AI.10066 NY Hyde Park 12538 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Regional Sales Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bill Peat Date of Receipt Mailing Address 4315 Buckingham Drive M = M 12 16 2010 City Zip Code State Transaction ID: SA11AI.10068 NY Schenectady 12304 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation MVP Change Manager (IT) Receipt For: Aggregate Year-to-Date ▼ Primary General 206.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa | al PAC | | | |
| Full Name (Last, First, Middle Initial) A. Bill Peat Mailing Address 4345 Bushinghers Privalent | Date of Receipt | | | |
| Mailing Address 4315 Buckingham Drive | 12 30 2010 | | | |
| City | State Zip Code | Transaction ID : SA11AI.10069 | | |
| Schenectady | NY 12304 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | 10.00 | | |
| Name of Employer | Occupation | - | | |
| MVP | Change Manager (IT) | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 216.00 | | | |
| Full Name (Last, First, Middle Initial) | 210.00 | | | |
| B. Donald Rahn | | Date of Receipt | | |
| Mailing Address 931 Northumberland Dr. | 12 03 2010 | | | |
| City | State Zip Code | Transaction ID : SA11AI.10082 | | |
| Niskayuna | NY 12309 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | 20.00 | | |
| Name of Employer | Occupation | 1 | | |
| MVP Health Care | Assoc. Director | | | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | | | |
| Other (specify) | 290.00 | | | |
| Full Name (Last, First, Middle Initial) C. Donald Rahn | | Date of Receipt | | |
| Mailing Address 931 Northumberland Dr. | | 12 17 2010 | | |
| City Niskayuna | State Zip Code NY 12309 | Transaction ID : SA11AI.10083 Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | 20.00 | | |
| Name of Employer | Occupation | - | | |
| MVP Health Care | Assoc. Director | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | 310.00 | | | |
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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Aneli Rivera-Platt Date of Receipt Mailing Address 215 Dunrovin Lane 2010 12 31 City Zip Code State Transaction ID: SA11AI.10096 NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP HR Director Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ellen Runyon Date of Receipt Mailing Address 625 State Street 12 02 2010 City State Zip Code Transaction ID: SA11AI.10100 NY Schenectady 12047 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation MVP VP of E Business Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ellen Runyon Date of Receipt Mailing Address 625 State Street M M / 12 16 2010 City Zip Code State Transaction ID: SA11AI.10101 NY Schenectady 12047 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation VP of E Business MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Ellen Runyon Date of Receipt Mailing Address 625 State Street 30 2010 12 City Zip Code State Transaction ID: SA11AI.10102 NY Schenectady 12047 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation MVP VP of E Business Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Ryan Date of Receipt Mailing Address 24 Bluestone Ridge 12 03 2010 City State Zip Code Transaction ID: SA11AI.10103 Clifton Park NY 12065 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP Health Care VP Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Ryan Date of Receipt Mailing Address 24 Bluestone Ridge M = M 12 17 2010 City Zip Code State Transaction ID: SA11AI.10104 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP Underwriting MVP Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Thomas Ryan Date of Receipt Mailing Address 24 Bluestone Ridge 2010 12 31 City State Zip Code Transaction ID: SA11AI.10105 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Health Care VP Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Sauer Date of Receipt Mailing Address 160 Fifth Avenue 12 02 2010 City State Zip Code Transaction ID: SA11AI.10106 NY Saratoga Springs 12866 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP **VP Sales** Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel Sauer Date of Receipt Mailing Address 160 Fifth Avenue M M / 12 16 2010 City Zip Code State Transaction ID: SA11AI.10107 NY Saratoga Springs 12866 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **VP Sales** MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Daniel Sauer Date of Receipt Mailing Address 160 Fifth Avenue 30 2010 12 City State Zip Code Transaction ID: SA11AI.10108 NY Saratoga Springs 12866 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP **VP Sales** Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) Full Name (Last, First, Middle Initial) B. Margaret Stevenson Date of Receipt Mailing Address 3968 Thrush Ln 12 03 2010 City State Zip Code Transaction ID: SA11AI.10124 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Health Care **Director National Accounts** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Margaret Stevenson Date of Receipt Mailing Address 3968 Thrush Ln M = M 17 12 2010 City Zip Code State Transaction ID: SA11AI.10125 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation **Director National Accounts** MVP Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 45 OF 54 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Margaret Stevenson Date of Receipt Mailing Address 3968 Thrush Ln 2010 12 31 City Zip Code State Transaction ID: SA11AI.10126 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Health Care **Director National Accounts** Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Stitt Date of Receipt Mailing Address 684 Macelroy Road 12 02 2010 City State Zip Code Transaction ID: SA11AI.10127 Ballston Spa NY 12019 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP **Pharmacy Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** David Stitt Date of Receipt Mailing Address 684 Macelroy Road M M 12 16 2010 City Zip Code State Transaction ID: SA11AI.10128 NY Ballston Spa 12019 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation MVP **Pharmacy Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 46 OF 54 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) David Stitt Date of Receipt Mailing Address 684 Macelroy Road 30 2010 12 City State Zip Code Transaction ID: SA11AI.10129 NY Ballston Spa 12019 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Pharmacy Director Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Tracy Tadaro-Ott Date of Receipt Mailing Address 33 Everett Drive 12 02 2010 City State Zip Code Transaction ID: SA11AI.10130 NY Rochester 14624 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP VP, Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 870.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Tracy Tadaro-Ott Date of Receipt Mailing Address 33 Everett Drive M M / 12 16 2010 City Zip Code State Transaction ID: SA11AI.10131 NY Rochester 14624 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee.

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910.00

Occupation VP, Sales

Aggregate Year-to-Date ▼

Name of Employer

Primary

Other (specify)

General

MVP Receipt For:

FOR LINE NUMBER: PAGE 47 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott Date of Receipt Mailing Address 33 Everett Drive 30 2010 12 City Zip Code State Transaction ID: SA11AI.10132 NY Rochester 14624 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP VP, Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place 12 02 2010 City State Zip Code Transaction ID: SA11AI.10145 Middletown CT 06457 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 870.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place M M / 12 16 2010 City State Zip Code Transaction ID: SA11AI.10146 CT Middletown 06457 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation CIO MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 910.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 48 OF

| TEMIZED RECEIPTS | ' | Use separate schedule(s) for each category of the Detailed Summary Page | (check only one) X 11a |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| Any information copied from such Reports an or for commercial purposes, other than using | | | erson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa | | , , , , , , , , , , , , , , , , , , , | |
| Full Name (Last, First, Middle Initial) John Vangraafeiland Mailing Address 85 Pinehurst Place City Middletown FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify) | State CT C Occupation CIO Aggregate | Zip Code 06457 Year-to-Date ▼ 950.00 | Date of Receipt 12 30 2010 Transaction ID: SA11AI.10149 Amount of Each Receipt this Period 40.00 |
| Full Name (Last, First, Middle Initial) Shanon Vollmer Mailing Address 30 Wilton Court City Clifton Park FEC ID number of contributing federal political committee. Name of Employer MVP Health Care, Inc. Receipt For: Primary General Other (specify) | State NY C Occupation Associate C Aggregate | | Date of Receipt 12 02 2010 Transaction ID : SA11AI.10150 Amount of Each Receipt this Period 30.00 |
| Full Name (Last, First, Middle Initial) Shanon Vollmer Mailing Address 30 Wilton Court City Clifton Park FEC ID number of contributing federal political committee. Name of Employer MVP Health Care, Inc. Receipt For: Primary General Other (specify) | State NY C Occupation Associate C Aggregate | | Date of Receipt 12 16 2010 Transaction ID: SA11AI.10151 Amount of Each Receipt this Period 30.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 100.00 |

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

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54 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Shanon Vollmer Date of Receipt Mailing Address 30 Wilton Court 30 2010 12 City Zip Code State Transaction ID: SA11AI.10152 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Associate Counsel MVP Health Care. Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew Walkuski Date of Receipt Mailing Address 11 Lillian Drive 17 12 2010 City State Zip Code Transaction ID: SA11AI.10154 NY Scotia 12302 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. Sales Manager- East Region Receipt For: Aggregate Year-to-Date ▼ Primary General 206.00 Other (specify) Full Name (Last, First, Middle Initial) c. Matthew Walkuski Date of Receipt Mailing Address 11 Lillian Drive 12 31 2010 City Zip Code State Transaction ID: SA11AI.10155 NY Scotia 12302 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation MVP Health Care, Inc. Sales Manager- East Region Receipt For: Aggregate Year-to-Date ▼ Primary General 216.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 50 OF 54 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) James Wall Date of Receipt Mailing Address 19 Stonegath Road 2010 12 02 City Zip Code State Transaction ID: SA11AI.10156 NY Ballston Lake 12019 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Director Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Wall Date of Receipt Mailing Address 19 Stonegath Road 12 16 2010 City State Zip Code Transaction ID: SA11AI.10157 **Ballston Lake** NY 12019 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Wall Date of Receipt Mailing Address 19 Stonegath Road M M / 30 12 2010 City Zip Code State Transaction ID: SA11AI.10158 NY **Ballston Lake** 12019 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation MVP Director Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Tracey Welch Date of Receipt Mailing Address 134 Thornberry Lane 2010 12 0.3 City Zip Code State Transaction ID: SA11AI.10169 NY Rensselaer 12144 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation MVP Health Care Director Medical and Network Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tracey Welch Date of Receipt Mailing Address 134 Thornberry Lane 12 17 2010 City State Zip Code Transaction ID: SA11AI.10166 NY Rensselaer 12144 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation MVP Health Care Director Medical and Network Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tracey Welch Date of Receipt Mailing Address 134 Thornberry Lane M = M 12 31 2010 City Zip Code State Transaction ID: SA11AI.10170 NY Rensselaer 12144 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation MVP Health Care Director Medical and Network Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 52 OF 54

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| | tatements may not be sold or used by any perso name and address of any political committee to | | | |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal F | PAC | | | |
| Full Name (Last, First, Middle Initial) Peter Whitehouse Mailing Address 16 Oak Hill Drive | Date of Receipt | | | |
| City | City State Zip Code | | | |
| Loudon | NH 03307 | Transaction ID : SA11AI.10171 Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | С | 30.00 | | |
| Name of Employer MVP Health Care, Inc. Receipt For: | Occupation Sales Director - NH/VT Aggregate Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | 420.00 | | | |
| Full Name (Last, First, Middle Initial) Peter Whitehouse Mailing Address 46 Oak Hill Price | | Date of Receipt | | |
| Mailing Address 16 Oak Hill Drive City | State Zip Code NH 03307 | 12 16 2010 Transaction ID : SA11AI.10172 | | |
| Loudon FEC ID number of contributing federal political committee. | NH 03307 | Amount of Each Receipt this Period 30.00 | | |
| Name of Employer MVP Health Care, Inc. | Occupation Sales Director - NH/VT | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | | | |
| Full Name (Last, First, Middle Initial) Peter Whitehouse | | Date of Receipt | | |
| Mailing Address 16 Oak Hill Drive | | 12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| City Loudon | State Zip Code NH 03307 | Transaction ID : SA11AI.10173 Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | С | 30.00 | | |
| Name of Employer | Occupation | | | |
| MVP Health Care, Inc. Receipt For: Primary General Other (specify) ▼ | Sales Director - NH/VT Aggregate Year-to-Date ▼ 480.00 | | | |
| SUBTOTAL of Receipts This Page (optional) | • | 90.00 | | |
| TOTAL This Period (last page this line number | only) | | | |

FOR LINE NUMBER: PAGE 53 OF 54 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Gale Zdunczyk Date of Receipt Mailing Address 7 Cypress St 2010 12 16 City Zip Code State Transaction ID: SA11AI.10184 NY Albany 12205 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation MVP Health Care Manager Prospective Review Receipt For: Aggregate Year-to-Date ▼ Primary General 205.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gale Zdunczyk Date of Receipt Mailing Address 7 Cypress St 12 30 2010 City State Zip Code Transaction ID: SA11AI.10185 NY Albany 12205 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation MVP Health Care Manager Prospective Review Receipt For: Aggregate Year-to-Date ▼ Primary General 215.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 20.00 SUBTOTAL of Receipts This Page (optional)..... 3910.00 TOTAL This Period (last page this line number only).....

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

| | 9 |
|---|----|
| X | 10 |

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54 OF

NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Check Printing Deluxe Business Checks** Mailing Address P.O. Box 742572 City State Zip Code OH Cincinnati 45274 Transaction ID: SD10.4163 Outstanding Balance Beginning This Period 145.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 145.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Advertising Media Well Done Mailing Address 96 Jay Street City State Zip Code Schenectady NY 12305 Outstanding Balance Beginning This Period Transaction ID: SD10.4165 338.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 338.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 483.00 1) SUBTOTALS This Period This Page (optional)..... 483.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 483.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)